Case 16-36699 Doc 1 Filed 11/17/16 Entered 11/17/16 16:08:57 Desc Main Page 1 of 51 FILED Fill in this information to identify your case: UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: NOV 17 2016 Northern District of Illinois Case number (If known): Chapter you are filing under: ☑ Chapter 7 JEFFREY P. ALLSTEADT, CLERK Chapter 11 ☐ Chapter 12 ☐ Check if this is an ☐ Chapter 13 amended filing Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy 12/15 The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: **Identify Yourself About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 1. Your full name Write the name that is on your government-issued picture First name identification (for example, your driver's license or passport). Middle name Bring your picture identification to your meeting Last name with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) 2. All other names you have used in the last 8 First name vears Middle name Include your married or Middle name maiden names. Last name Last name First name First name Middle name Middle name Last name Last name xxx - xx - 0 9 8 0 3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer 9 xx - xx -9 xx - xx -\_\_\_\_\_\_ Identification number (ITIN)

Case 16-36699 Doc 1 Filed 11/17/16 Entered 11/17/16 16:08:57 Desc Main GRIFFITH GRIP

Page 2 of 51

Case number (if known)

|  |   | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
|--|---|---|---|
| (EIN) you t  | yer<br>on Numbers<br>nave used in       | I have not used any business names or EINs.   | ☐ I have not used any business names or EINs.   |
| the last 8 y   |   | Business name   | Business name   |
| Include trade<br>doing busine  |   | Business name   |   |
|  |   | business name   | Business name   |
|  |   | EIN   | EIN   |
|  |   | EIN   | EIN   |
| 5. Where you   | live                                    |   | If Debtor 2 lives at a different address:   |
|  |   | 5043 S. ROCINE #3   | Number Street   |
|  |   | CHICAGO IL 60609  City State ZIP Code   | City State ZIP Code   |
|  |   | County  | County  |
|  |   | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  |
|  |   | Number Street   | Number Street   |
|  |   | P.O. BOX<br>CHICAGO IL 60615  | P.O. Box  |
|  |   | City State ZIP Code   | City State ZIP Code   |
| 6. Why you are   |   | Check one;  | Check one:  |
| this district<br>bankruptcy  |   | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  |
|  |   | I have another reason. Explain. (See 28 U.S.C. § 1408.)   | ☐ I have another reason. Explain.<br>(See 28 U.S.C. § 1408.)  |
|  |   |   |   |
|  |   |   |   |
| 4559654 (CO.)554, CO.)554, SANDEY SAN | *************************************** |   | を対象を持ちないとは、自然を対象によっております。 他のでは、自然を対象によっては、自然を対象によっては、自然を対象には、自然を対象によっては、自然を持定によっては |

Case 16-36699 Doc 1 Filed 11/17/16 Entered 11/17/16 16:08:57 Desc Main

Page 3 of 51

Case number (if known)

Part 2: **Tell the Court About Your Bankruptcy Case** 

| 7.                                     | The chapter of the<br>Bankruptcy Code you<br>are choosing to file<br>under  | for Bank Cha   | k <i>ruptcy</i> (For   | orief description o<br>m 2010)). Also, g  | f each, see <i>Noti</i><br>to the top of p  | ce Required by 1:<br>age 1 and check t  | 1 U.S.C. § 342(b) for Individuals Filing the appropriate box.  |
|--|---|--|--|---|---|---|--|
| ************************************** | How you will pay the fee  | I necession of the second substitution of the se | I court for rself, you no mitting you a pre-pring ed to pay a lication for quest that aw, a judge than 150% the fee in i | more details about any pay with cast payment on your ted address.  Ithe fee in instate Individuals to Formy fee be waite may, but is not of the official prostallments). If your pay we may and the official prostallments. | out how you ment out how you ments. If you way The Filing to red (You may trequired to, wo overty line the you choose the | nay pay. Typical heck, or money ar attorney may a choose this op Fee in Installme request this opt vaive your fee, at applies to you is option, you m | eck with the clerk's office in your ly, if you are paying the fee order. If your attorney is pay with a credit card or check official, sign and attach the ents (Official Form 103A).  Ion only if you are filing for Chapter 7, and may do so only if your income is a family size and you are unable to to sust fill out the Application to Have the with your petition. |
| 9.                                     | Have you filed for bankruptcy within the last 8 years?  | No   | District   |   | When When   | MM / DD / YYYY  | Case number  Case number   |
| 10.                                    | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | No No Yes.   | Debtor District Debtor District  |   | When  |   | Relationship to you  Case number, if known  Relationship to you  Case number, if known   |
| 11.                                    | Do you rent your residence?   | □ No.<br>☑ Yes.  | residence?  No. Go  Yes. Fi  | andlord obtained a  |   |   | and do you want to stay in your  Against You (Form 101A) and file it with  |

Case 16-36699

Doc 1

Filed 11/17/16

Entered 11/17/16 16:08:57 Page 4 of 51

Desc Main

Debtor 1

Case number (if known)

| . Are you a sole proprietor   | Mo.     | Go to Part 4.             |  |                  |  |
|---|---------|---------------------------|--|------------------|--|
| of any full- or part-time business?   | ☐ Yes   | . Name and location of b  | usiness  |                  |  |
| A sole proprietorship is a  |         | . Hame and location of b  | usiness  |                  |  |
| business you operate as an individual, and is not a separate legal entity such as               |         | Name of business, if any  |  |                  |  |
| a corporation, partnership, or LLC.   |         | Number Street             |  |                  | A STATE OF THE STA |
| If you have more than one   |         |                           |  |                  |  |
| sole proprietorship, use a separate sheet and attach it   |         |                           |  |                  |  |
| to this petition.   |         | City                      |  | State            | ZIP Code   |
|   |         | •                         |  | Olulo            | 211 0000   |
|   |         | Check the appropriate b   | oox to describe your busii   | ness:            |  |
|   |         | ☐ Health Care Busines     | ss (as defined in 11 U.S.0   | C. § 101(27A))   |  |
|   |         | ☐ Single Asset Real E     | state (as defined in 11 U.   | .S.C. § 101(51B) |  |
|   |         | ☐ Stockbroker (as defi    | ned in 11 U.S.C. § 101(5   | 3A))             |  |
|   |         | ☐ Commodity Broker (      | as defined in 11 U.S.C. §  | 101(6))          |  |
|   |         | ☐ None of the above       |  |                  |  |
| For a definition of small business debtor, see 11 U.S.C. § 101(51D).                            |         | the Bankruptcy Code.      |  |                  | or according to the definition in ording to the definition in the  |
| ort 4: Report if You Own o  | or Have | Any Hazardous Prop        | erty or Any Property   | That Needs I     | mmediate Attention   |
| Do you own or have any  | ₩ No    |                           |  |                  |  |
| property that poses or is alleged to pose a threat  | Yes.    | What is the hazard?       |  |                  |  |
| of imminent and   |         |                           |  |                  |  |
| identifiable hazard to public health or safety?   |         |                           |  |                  | The state of the s |
| Or do you own any   |         |                           |  |                  |  |
| property that needs immediate attention?  |         | If immediate attention is | s needed, why is it neede  | ed?              |  |
| For example, do you own   |         |                           |  |                  |  |
| perishable goods, or livestock<br>that must be fed, or a building<br>that needs urgent repairs? |         |                           |  |                  |  |
|   |         | Where is the property?    |  |                  |  |
|   |         |                           | Number Street  |                  |  |
|   |         |                           |  |                  |  |
|   |         |                           |  |                  |  |
|   |         |                           | NAME OF THE PROPERTY OF THE PR |                  |  |

#### Case 16-36699 Doc 1 Filed 11/17/16 Document

Entered 11/17/16 16:08:57 Desc Main Page 5 of 51

Case number (if know

Part 5:

#### **Explain Your Efforts to Receive a Briefing About Credit Counseling**

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| About Debtor 1:   |   | About Debtor 2 (S   | pouse Only in a Joint Case):  |
|---|---|---|---|
| Yoy must check one  | 9:  | You must check on   | e:  |
| counseling age  | efing from an approved credit<br>ncy within the 180 days before I<br>uptcy petition, and I received a<br>mpletion.  | counseling age  | iefing from an approved credit<br>ency within the 180 days before I<br>ruptcy petition, and I received a<br>ompletion.  |
| Attach a copy of<br>plan, if any, that                        | the certificate and the payment you developed with the agency.  | Attach a copy of plan, if any, that                         | f the certificate and the payment tyou developed with the agency.   |
| counseling age  | efing from an approved credit<br>ncy within the 180 days before I<br>uptcy petition, but I do not have a<br>mpletion.   | counseling age  | efing from an approved credit<br>ency within the 180 days before I<br>ruptcy petition, but I do not have a<br>empletion.  |
|   | fter you file this bankruptcy petition, copy of the certificate and payment   |   | after you file this bankruptcy petition, copy of the certificate and payment  |
| services from a<br>unable to obtain<br>days after I mad       | sked for credit counseling<br>n approved agency, but was<br>n those services during the 7<br>le my request, and exigent<br>merit a 30-day temporary waiver<br>ent.        | services from a<br>unable to obtai<br>days after I mad      | sked for credit counseling<br>in approved agency, but was<br>in those services during the 7<br>de my request, and exigent<br>merit a 30-day temporary waiver<br>ient.                   |
| requirement, atta<br>what efforts you<br>you were unable      | ay temporary waiver of the ch a separate sheet explaining made to obtain the briefing, why to obtain it before you filed for what exigent circumstances le this case.     | requirement, atta<br>what efforts you<br>you were unable    | day temporary waiver of the ach a separate sheet explaining made to obtain the briefing, why to obtain it before you filed for what exigent circumstances ile this case.                |
| dissatisfied with   | e dismissed if the court is<br>your reasons for not receiving a<br>ou filed for bankruptcy.   | dissatisfied with   | oe dismissed if the court is<br>your reasons for not receiving a<br>ou filed for bankruptcy.  |
| still receive a brid<br>You must file a c<br>agency, along wi | sfied with your reasons, you must efing within 30 days after you file. ertificate from the approved th a copy of the payment plan you . If you do not do so, your case d. | still receive a bri<br>You must file a c<br>agency, along w | tisfied with your reasons, you must<br>efing within 30 days after you file.<br>certificate from the approved<br>ith a copy of the payment plan you<br>y. If you do not do so, your case |
| Any extension of  | the 30-day deadline is granted d is limited to a maximum of 15  | Any extension of  | f the 30-day deadline is granted and is limited to a maximum of 15  |
| l am not require credit counselin                             | d to receive a briefing about<br>g because of:  | I am not require credit counseli                            | ed to receive a briefing about<br>ng because of:  |
| ☐ Incapacity.   | I have a mental illness or a mental<br>deficiency that makes me<br>incapable of realizing or making<br>rational decisions about finances.                                 | ☐ Incapacity.   | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.  |
| ☐ Disability.   | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.          | ☐ Disability.   | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.                        |
| ☐ Active duty.  | I am currently on active military duty in a military combat zone.   | Active duty.  | I am currently on active military duty in a military combat zone.   |
| If you believe you  | are not required to receive a   | If you believe yo   | u are not required to receive a   |

briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

Case 16-36699 Doc 1 Filed 11/17/16
ALBERT ANTHONY GRIFFITH

Entered 11/17/16 16:08:57 Desc Main Page 6 of 51

Case number (# known)\_\_\_\_\_

| Pa             | rt 6: Answer These Que  | stions for Reporting Purpo  | ses   |   |  |  |  |
|----------------|---|---|---|---|--|--|--|
| 16.            | What kind of debts do you have?   | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." |   |   |  |  |  |
|                | you nave:   | No. Go to line 16b. Yes. Go to line 17.   |   |   |  |  |  |
|                |   | 16b. <b>Are your debts prima</b> money for a business or i  | arily business debts? Business debt.<br>nvestment or through the operation of th          | s are debts that you incurred to obtain<br>e business or investment.            |  |  |  |
|                |   | <ul><li>□ No. Go to line 16c.</li><li>□ Yes. Go to line 17.</li></ul>   |   |   |  |  |  |
|                |   | 16c. State the type of debts yo   | ou owe that are not consumer debts or bu  | usiness debts.  |  |  |  |
|                | Are you filing under<br>Chapter 7?  | ☐ No. I am not filing under C   | Chapter 7. Go to line 18.   |   |  |  |  |
|                | Do you estimate that after<br>any exempt property is<br>excluded and  | Yes. I am filing under Chap administrative expens   | oter 7. Do you estimate that after any exe<br>es are paid that funds will be available to | mpt property is excluded and odistribute to unsecured creditors?                |  |  |  |
|                | administrative expenses<br>are paid that funds will be<br>available for distribution<br>to unsecured creditors? | ☐ Yes   |   |   |  |  |  |
|                | How many creditors do you estimate that you   | <b>1</b> 1-49   | 1,000-5,000<br>5,001-10,000   | 25,001-50,000<br>50,001-100,000   |  |  |  |
| No. Control    | owe?  | 100-199<br>200-999  | 10,001-10,000   | ☐ More than 100,000   |  |  |  |
|                | How much do you estimate your assets to   | ¥ \$0-\$50,000<br>□ \$50,001-\$100,000  | \$1,000,001-\$10 million \$10,000,001-\$50 million  | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion                          |  |  |  |
|                | be worth?   | \$100,001-\$500,000<br>\$500,001-\$1 million  | \$50,000,001-\$100 million<br>\$100,000,001-\$500 million                                 | ☐ \$10,000,000,001-\$10 billion ☐ More than \$50 billion                        |  |  |  |
|                | How much do you<br>estimate your liabilities  | \$0-\$50,000<br>\$50,001-\$100,000  | \$1,000,001-\$10 million \$10,000,001-\$50 million  | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion                          |  |  |  |
|                | to be?  | \$100,001-\$500,000<br>\$500,001-\$1 million  | \$50,000,001-\$100 million<br>\$100,000,001-\$500 million                                 | ☐ \$10,000,000,001-\$10 billion ☐ More than \$50 billion                        |  |  |  |
| Pa             | 1272 Sign Below   | *   |   |   |  |  |  |
| Fo             | r you   | I have examined this petition, a correct.   | and I declare under penalty of perjury tha  | t the information provided is true and  |  |  |  |
|                |   |   | hapter 7, I am aware that I may proceed,<br>I understand the relief available under e     | if eligible, under Chapter 7, 11,12, or 13 ach chapter, and I choose to proceed |  |  |  |
|                |   |   | nd I did not pay or agree to pay someone<br>and read the notice required by 11 U.S.       | who is not an attorney to help me fill out C. § 342(b).                         |  |  |  |
|                |   | I request relief in accordance w  | vith the chapter of title 11, United States   | Code, specified in this petition.   |  |  |  |
|                |   | I understand making a false sta<br>with a bankruptcy case can res<br>18 U.S.C. §§ 152, 1341, 1519,  | sult in fines up to \$250,000, or imprisonm   | g money or property by fraud in connection ent for up to 20 years, or both.     |  |  |  |
|                |   | * Albert Ainth<br>Signature of Debtor 1   | ong Griffel *   | ro of Dobtor 2  |  |  |  |
|                |   | Executed on   | 2016 Execute  |   |  |  |  |
| Alesteta (1916 |   | MM / DD /   | YYYY  | MM / DD /YYYY   |  |  |  |

Case 16-36699 Doc 1 Filed 11/17/16 Entered 11/17/16 16:08:57

ALBERT ANTHONY DOCUMENT Page 7 of 51

Case number (# known)

For your attorney, if you are represented by one

Debtor 1

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

Desc Main

|                                  | Date                                    |          |                                       |
|----------------------------------|---|----------|---------------------------------------|
| Signature of Attorney for Debtor |   | MM /     | DD /YYYY                              |
|                                  |   |          |                                       |
| Printed name                     |   |          | · · · · · · · · · · · · · · · · · · · |
| Firm name                        | *************************************** |          |                                       |
| lumber Street                    |   |          |                                       |
|                                  |   |          |                                       |
| City                             | State                                   | ZIP Code |                                       |
| Contact phone                    | Email addre                             | ss       |                                       |
|                                  |   |          |                                       |
| Bar number                       | State                                   | remoun.  |                                       |

Case 16-36699 Doc 1 Filed 11/17/16 Entered 11/17/16 1
ALBERT ANTHONY GREETH

consequences?

1

Entered 11/17/16 16:08:57 Desc Main Page 8 of 51

Case number (if known)

For you if you are filing this bankruptcy without an attorney

Debtor 1

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action with long-term financial and legal

By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.

VV

| K A    | beit       | Anthony                  | Giffil x                      | •               |               |
|--------|------------|--------------------------|-------------------------------|-----------------|---------------|
| Sign   | ature of [ | Debtor 1 ;               | ) <sub>1</sub> / <sub>V</sub> | Signature of De | btor 2        |
| Date   |            | 11/17/2016<br>MM/DD/YYYY | . 0.0                         | Date            | MM / DD /YYYY |
| Conta  | ct phone   |                          |                               | Contact phone   |               |
| Cell p | hone       | 773-898                  | 4-4241                        | Cell phone      |               |
| Email  | address    | ALCHEMIST                | GQ-ogmail.com                 | Email address   |               |

# Case 16-36699 Doc 1 Filed 11/17/16 Entered 11/17/16 16:08:57 Desc Main Document Page 9 of 51

| Document Page 9 of 51  | _                                       |   |
|--|---|---|
| Fill in this information to identify your case:  |   |   |
| Alacor Audlan Correct  |   |   |
| Debtor 1 A-DERC Middle Name Last Name  |   |   |
| Debtor 2 (Spouse, if filing) First Name Middle Name Last Name  |   |   |
| Lags (unit)  |   |   |
| United States Bankruptcy Court for the: Northern District of Illinois  |   |   |
| Case number (If known)   |   | Check if this is an amended filing              |
|  |   | amended filling                                 |
|  |   |   |
| Official Form 106Sum   |   |   |
| <b>Summary of Your Assets and Liabilities and Certain S</b>  | statistical Info                        | rmation 12/15                                   |
| Be as complete and accurate as possible. If two married people are filing together, both are information. Fill out all of your schedules first; then complete the information on this form. I your original forms, you must fill out a new <i>Summary</i> and check the box at the top of this part 1: Summarize Your Assets | f vou are filing amended                | supplying correct<br>I schedules after you file |
|  |   | A Subfedence of the contraction                 |
|  |   | Your assets                                     |
| Schedule A/B: Property (Official Form 106A/B)  |   | Value of what you own                           |
| 1a. Copy line 55, Total real estate, from Schedule A/B   | *************************************** | \$  |
|  |   | llann ad  |
| 1b. Copy line 62, Total personal property, from Schedule A/B   |   | \$_4000.°                                       |
| 1c. Copy line 63, Total of all property on Schedule A/B  |   | NAM ®   |
|  | *************************************** | \$ 7000,00                                      |
| Paru 2: Summarize Your Liabilities   |   |   |
| Outsine Four Liabilities   |   |   |
|  |   |   |
|  |   | Your liabilities Amount you owe                 |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  |   | <u> </u>  |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part   | 1 of Schedule D                         | \$  |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  |   | 1150 (D   |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F   |   | \$ 450.00                                       |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  |   | 77112   |
|  |   | + \$ 1; / 70                                    |
|  | Your total liabilities                  | \$ 8,193.00                                     |
| Part 3: Summarize Your Income and Expenses   |   |   |
| 4. Schedule I: Your Income (Official Form 106I)  | _                                       | an B in   |
| 4. Schedule I: Your Income (Official Form 1061)  Copy your combined monthly income from line 12 of Schedule I  | 1389.00                                 | s 1389.   |
|  |   | 1469 a  |
| <ol> <li>Schedule J: Your Expenses (Official Form 106J)</li> <li>Copy your monthly expenses from line 22c of Schedule J</li> </ol>   |   | s 1469.   |
|  |   |   |

Case 16-36699 Doc 1 Filed 11/17/16 Entered 11/17/16 16:08:57 Desc Main ANTIN Document Page 10 of 51

| P  | art 4:             | Answer These Questions for Administrative and Statistical Record   | ls  |   |
|----|--------------------|--|---|---|
| 6. | Are yo             | u filing for bankruptcy under Chapters 7, 11, or 13?   |   |   |
|    | No.                | . You have nothing to report on this part of the form. Check this box and submit this s  | form to the court with your other   | er schedules.   |
| 7. | What k             | ind of debt do you have?   | nd der der verstätte die die voord verster verster verster verster de die plant de voord versteren verstelle d  | 1900 tila 1986 A Pitar de 1955 Sign produkt 1988 stjernisk skilletindig freg eppengreg 1949, hvorfendirfilm |
|    | You fam            | ur debts are primarily consumer debts. Consumer debts are those "incurred by a nily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purp | n individual primarily for a persoses. 28 U.S.C. § 159.   | onal,   |
|    | You<br>this        | ur debts are not primarily consumer debts. You have nothing to report on this pa<br>form to the court with your other schedules.   | rt of the form. Check this box a  | nd submit   |
| 8. | From the Form 12   | he Statement of Your Current Monthly Income: Copy your total current monthly in 22A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.                           | ncome from Official   | \$ 1750.°°  |
| 9. | Copy th            | ne following special categories of claims from Part 4, line 6 of Schedule E/F:   | et verteel van van de verteel van van de verde verd | OMESTA AN PORTATION AND PROPERTY AND                                    |
|    |                    |  | Total claim   |   |
|    | From               | Part 4 on <i>Schedule E/F</i> , copy the following:  | e.<br>H<br>Ville Hill Managar ann a<br>Ville Hill Managar ann a   |   |
|    | 9a. Dom            | nestic support obligations (Copy line 6a.)   | <u> </u>  |   |
|    | 9b. Taxe           | es and certain other debts you owe the government. (Copy line 6b.)   | · 450.00  |   |
|    | 9c. Clair          | ms for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$  | į   |
|    | 9d. Stud           | lent loans. (Copy line 6f.)  | \$  |   |
|    | 9e. Obliç<br>prior | gations arising out of a separation agreement or divorce that you did not report as ity claims. (Copy line 6g.)  | \$  |   |
|    | 9f. Debt           | ts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)  | + \$  |   |
|    | 9g. <b>Tota</b>    | II. Add lines 9a through 9f.   | s 450.00  | ,   |

Case 16-36699 Doc 1 Filed 11/17/16 Entered 11/17/16 16:08:57 Desc Main

Document Page 11 of 51

| Debtor 1            | ALBERT                   | ANTHONY                      | GRIFFITH  |
|---------------------|--------------------------|------------------------------|-----------|
|                     | First Name               | Middle Name                  | Last Name |
| Debtor 2            |                          |                              |           |
| (Spouse, if filing) | First Name               | Middle Name                  | Last Name |
| All-trad Outlier    | Bankruptcy Court for the | : Northern District of Illii | nois      |
| united States E     |                          |                              |           |
| Case number         | , ,                      |                              |           |

☐ Check if this is an amended filing

## Official Form 106A/B

## **Schedule A/B: Property**

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

| N  | o. Go to Part 2.                                   |  |  |   |
|----|--|--|--|---|
| Y  | es. Where is the property?                         |  |  |   |
| 1. |  | What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building   | Do not deduct secured cla<br>the amount of any secured<br>Creditors Who Have Clain | iims or exemptions. Pu<br>d claims on <i>Schedule E</i> |
|    | Street address, if available, or other description | Condominium or cooperative  Manufactured or mobile home  Land  | Current value of the entire property?  | TO NUMBER OF STREET STREET                              |
|    | City State ZIP Code                                | ☐ Investment property ☐ Timeshare ☐ Other  | Describe the nature or interest (such as fee the entireties, or a life             | simple, tenancy by                                      |
|    |  | Who has an interest in the property? Check one.  | and onto other the   | . 63(4)(), 11 K110#11.                                  |
|    | County   | ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another  Other information you wish to add about this ite | Check if this is con<br>(see instructions)   | mmunity property  |
| )u | own or have more than one, list here:              | property identification number:  |  |   |
| 2. | Street address, if available, or other description | What is the property? Check all that apply.  ☐ Single-family home ☐ Duplex or multi-unit building  | Do not deduct secured cla<br>the amount of any secured<br>Creditors Who Have Claim | ims or exemptions. Pu<br>I claims on <i>Schedule L</i>  |
|    |  | Condominium or cooperative  Manufactured or mobile home  | Current value of the entire property?  | Current value of to portion you own?                    |
|    |  | Land Investment property   | \$   | \$  |
|    | City State ZiP Code                                | ☐ Timeshare ☐ Other  | Describe the nature of interest (such as fees the entireties, or a life            | simple, tenancy by                                      |
|    |  | Who has an interest in the property? Check one.  |  |   |
|    | County   | ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another   | Check if this is con (see instructions)  | mmunity property  |
|    |  | Other information you wish to add about this iter property identification number:  | n, such as local   |   |

| Debtor | 1 |  |
|--------|---|--|

| hase) | 16-3669 <b>p</b> | IN P196114 | E E | 11/17/16<br>ument   |
|-------|------------------|------------|-----|---------------------|
| Name  | Middle Name      | Last Name  |     | <del>Ullielit</del> |

| 1.3                  | 3. Street address, if available, or other description  | What is the property? Check all that apply.  ☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative   | the amount of any secur<br>Creditors Who Have Cla  | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the                   |
|----------------------|--|--|--|--|
|                      |  | Manufactured or mobile home  | entire property?   | portion you own?   |
|                      |  | Land   | \$   | \$   |
|                      | City State ZiP Code  | Investment property Timeshare Other  | Describe the nature of your ownership<br>interest (such as fee simple, tenancy the<br>the entireties, or a life estate), if know |  |
|                      |  | Who has an interest in the property? Check one.  |  | · · · · · · · · · · · · · · · · · · ·  |
|                      | County   | Debtor 1 only  |  |  |
|                      |  | Debtor 2 only  | <b>D</b> • · · · · · ·   |  |
|                      |  | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another   | Check if this is co  | ommunity property  |
|                      |  | Other information you wish to add about this its property identification number:   | em, such as local  |  |
| 2. <b>Add</b>        | the dollar value of the portion you own for al   | ll of your entries from Part 1, including any entrie   | s for pages  | . &  |
| you                  |  | nere   |  | <u> </u>   |
| )o vou               | own lease or have legal or equitable interes   | et in any vohicles, whether they are registered as   |  |  |
| ou owr               | n that someone else drives. If you lease a vehicle<br>of<br>s, vans, trucks, tractors, sport utility vehicles,<br>No   | et in any vehicles, whether they are registered or nee, also report it on Schedule G: Executory Contracts and motorcycles  | not? Include any vehicles<br>and Unexpired Leases.   |  |
| you owr              | n that someone else drives. If you lease a vehicle<br>of<br>s, vans, trucks, tractors, sport utility vehicles,<br>No   | e, also report it on Schedule G: Executory Contracts a   | and Unexpired Leases.  |  |
| you owr<br>B. Care   | n that someone else drives. If you lease a vehicle of standard trucks, tractors, sport utility vehicles, who were standard trucks.  Make:  | e, also report it on <i>Schedule G: Executory Contracts a</i><br>, motorcycles   | and Unexpired Leases.  Do not deduct secured clathe amount of any securec  | ims or exemptions. Put<br>I claims on <i>Schedule D:</i>   |
| you owr              | n that someone else drives. If you lease a vehicle of the strucks, tractors, sport utility vehicles, who were the strucks and the strucks when the strucks were the strucks when | who has an interest in the property? Check one.  Debtor 1 only  Debtor 2 only  | and Unexpired Leases.  Do not deduct secured cla the amount of any securec Creditors Who Have Claim                              | ims or exemptions. Put<br>I claims on <i>Schedule D:</i>   |
| you owr              | that someone else drives. If you lease a vehicle f, vans, trucks, tractors, sport utility vehicles, No Yes  Make:  Model:  Year:   | who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only  | Do not deduct secured cla<br>the amount of any secure<br>Creditors Who Have Clain  | ims or exemptions. Put<br>I claims on Schedule D:<br>Is Secured by Property.<br>Current value of the               |
| you owr              | that someone else drives. If you lease a vehicle for vans, trucks, tractors, sport utility vehicles, No Yes  Make:  Model:  Year:  Approximate mileage:  | who has an interest in the property? Check one.  Debtor 1 only  Debtor 2 only  | and Unexpired Leases.  Do not deduct secured cla the amount of any securec Creditors Who Have Claim                              | ims or exemptions. Put<br>I claims on Schedule D:<br>as Secured by Property.                                       |
| you owr              | that someone else drives. If you lease a vehicle f, vans, trucks, tractors, sport utility vehicles, No Yes  Make:  Model:  Year:   | who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only  | Do not deduct secured cla<br>the amount of any secure<br>Creditors Who Have Clain  | ims or exemptions. Put<br>I claims on Schedule D:<br>Is Secured by Property.<br>Current value of the               |
| 3. Care 3. 1         | that someone else drives. If you lease a vehicle for vans, trucks, tractors, sport utility vehicles, No Yes  Make:  Model:  Year:  Approximate mileage:  | who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see  | Do not deduct secured cla<br>the amount of any secure<br>Creditors Who Have Clain  | ims or exemptions. Put<br>I claims on Schedule D:<br>Is Secured by Property.<br>Current value of the               |
| 3. Care 3. 1         | Make: Model: Year: Approximate mileage: Other information:   | who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see  | Do not deduct secured clathe amount of any secured Creditors Who Have Claim  Current value of the entire property?  \$           | ims or exemptions. Put It claims on Schedule D: It is Secured by Property.  Current value of the portion you own?  |
| 3. Care 3. Care 3.1. | Make: Model: Year: Approximate mileage: Other information:   | who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. | Do not deduct secured clathe amount of any secured Creditors Who Have Claim  Current value of the entire property?  \$           | ims or exemptions. Put it claims on Schedule D: is Secured by Property.  Current value of the portion you own?  \$ |
| 3. Care 3. Care 3.1. | Make:  Other information:  I own or have more than one, describe here:  Make:  Make:   | who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. | Do not deduct secured clathe amount of any secured Creditors Who Have Claim  Current value of the entire property?  \$           | ims or exemptions. Put I claims on Schedule D: is Secured by Properly.  Current value of the portion you own?  \$  |
| 3. Care 3. Care 3.1. | Make: Approximate mileage: Other information:  Jown or have more than one, describe here:  Make: Model: Year:  Make: Model: Year:  Make: Model: Year:  Make: Model: Year:  | who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one.                            | Do not deduct secured clathe amount of any secured Creditors Who Have Claim  Current value of the entire property?  \$           | ims or exemptions. Put I claims on Schedule D: as Secured by Property.  Current value of the portion you own?  \$  |
| 3. Care 3. Care 3.1. | that someone else drives. If you lease a vehicle f, vans, trucks, tractors, sport utility vehicles, No /es  Make: Model: Year: Approximate mileage: Other information:  Jown or have more than one, describe here: Make: Model: Year: Approximate mileage:  Jown or have more than one, describe here:  Make: Model: Year: Approximate mileage:  | who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. | Do not deduct secured clathe amount of any secured Creditors Who Have Claim  Current value of the entire property?  \$           | ims or exemptions. Put I claims on Schedule D: is Secured by Property.  Current value of the portion you own?  \$  |
| 3. Care 3. Care 3.1. | Make: Approximate mileage: Other information:  Jown or have more than one, describe here:  Make: Model: Year:  Make: Model: Year:  Make: Model: Year:  Make: Model: Year:  | who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one.                            | Do not deduct secured clathe amount of any secured Creditors Who Have Claim  Current value of the entire property?  \$           | ims or exemptions. Put I claims on Schedule D: as Secured by Property.  Current value of the portion you own?  \$  |

TPOCITY Filed 11/17/16 Entered 11/17/16 16:08:57 Desc Main Page 13 of 15 1 umber (# known)

|   |  | Who has an interest in the property? Check one.   | ACTION OMINAL SACIDAD CISIO  |  |
|---|--|---|--|--|
| .3.   | Make:  | Debtor 1 only   | the amount of any secured of   |  |
|   | William I was a second with the second with the second will be second with the second willines will be second with the second will be second with the secon | Debtor 2 only   | Creditors Who Have Claims  | Secured by Property  |
|   | Year:  | Debtor 1 and Debtor 2 only  | Current value of the   | Current value of the   |
|   | Approximate mileage:   | At least one of the debtors and another   | entire property?   | portion you own?   |
|   | Other information:   |   | $\mathscr{O}\!$  |  |
|   |  | ☐ Check if this is community property (see instructions)  | \$   | \$   |
| 3.4.  | Make:  | Who has an interest in the property? Check one.   | Do not deduct secured claim  | ns or exemptions. Put  |
|   | Model:   | Debtor 1 only   | the amount of any secured of   | laims on Schedule D:   |
|   | CONT. CO. CO. CO. CO. CO. CO. CO. CO. CO. CO   | Debtor 2 only   | Creditors Who Have Claims  | Secured by Property.   |
|   | Year:  | Debtor 1 and Debtor 2 only  |  | Current value of th  |
|   | Approximate mileage:   | At least one of the debtors and another   | entire property? p   | oortion you own?   |
|   | Other information:   |   | $(\mathscr{T})$  |  |
|   |  | ☐ Check if this is community property (see instructions)  | \$\$   |  |
| alm)<br>No  | ples: Boats, trailers, motors, personal waterd   | her recreational vehicles, other vehicles, and acces raft, fishing vessels, snowmobiles, motorcycle accesso   |  |  |
| No<br>Ye  | ples: Boats, trailers, motors, personal waterd   |   | Do not deduct secured claims the amount of any secured claims to Creditors Who Have Claims S   | s or exemptions. Put<br>aims on Schedule D:<br>Secured by Property.  |
| Maria<br>No<br>No<br>No<br>No<br>No<br>No<br>No<br>No<br>No<br>No<br>No<br>No<br>No | oles: Boats, trailers, motors, personal waterd oss  Make: Model: Year:   | who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only   | Do not deduct secured claims the amount of any secured claims to Creditors Who Have Claims S   | s or exemptions. Put<br>aims on Schedule D:<br>Secured by Property.<br>Current value of th   |
| No Ye   | poles: Boats, trailers, motors, personal water of the session of t | who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)   | Do not deduct secured claims the amount of any secured claims the amount of any secured claims S.  Current value of the entire property?   | s or exemptions. Put<br>aims on Schedule D:<br>Secured by Property.<br>Current value of th<br>ortion you own?  |
| No Yee  | over or have more than one, list here:  Make:  Make:  Model:   | who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)   | Do not deduct secured claims the amount of any secured claims S  Current value of the entire property?  \$   | s or exemptions. Put aims on Schedule D: Secured by Property.  Surrent value of thoriton you own?  |
| No Yee  | poles: Boats, trailers, motors, personal water of the session of t | who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only  | Do not deduct secured claims the amount of any secured claims the amount of any secured claims S  Current value of the entire property?  \$  | s or exemptions. Put aims on Schedule D; Secured by Property.  Current value of the ortion you own?  |
| No. 1 Yes   | over or have more than one, list here:  Make:  Make:  Model:   | who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only  | Do not deduct secured claims the amount of any secured claims S  Current value of the entire property?  \$ \$ \$  Do not deduct secured claims the amount of any secured claims the amount of any secured claims S  Current value of the C  Current value of the C | s or exemptions. Put aims on Schedule D: Secured by Property.  Current value of the ortion you own?  s or exemptions. Put aims on Schedule D: Secured by Property.                                       |
| Not Ye  | poles: Boats, trailers, motors, personal water of the session of t | who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 1 and Debtor 2 only | Do not deduct secured claims the amount of any secured claims S  Current value of the entire property?  \$ Do not deduct secured claims the amount of any secured claims the amount of any secured claims S  Current value of the C  Current value of the C        | s or exemptions. Put aims on Schedule D; Secured by Property.  Current value of the ortion you own?  |
| Not Ye  | poles: Boats, trailers, motors, personal water of the session of t | who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only  | Do not deduct secured claims the amount of any secured claims S  Current value of the entire property?  \$ \$ \$  Do not deduct secured claims the amount of any secured claims the amount of any secured claims S  Current value of the C  Current value of the C | s or exemptions. Put aims on Schedule D: Secured by Property.  Current value of the ortion you own?  s or exemptions. Put aims on Schedule D: Secured by Property.  Current value of the ortion you own? |

Decument Page 14 of 5 1 umber (# known)

Part 3:

**Describe Your Personal and Household Items** 

| D          | o you own or have any legal or equitable interest in any of the following items?   | Current value of the                          |
|------------|--|---|
|            |  | portion you own? Do not deduct secured claims |
| 6.         | Household goods and furnishings  | or exemptions.                                |
|            | Examples: Major appliances, furniture, linens, china, kitchenware  |   |
|            | Wyes. Describe Marress and Box Spring; Microwave; Card Trace<br>Forks & KNIVES   | s_500.00                                      |
| 7.         | Electronics  | nead.   |
|            | Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games |   |
|            | Yes. Describe CELL PHONE, TV, DVD Player   | s_1,000.00                                    |
| 8.         | Collectibles of value  | J   |
|            | Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles    |   |
|            | Yes. Describe  | s   |
| 9.         | Equipment for sports and hobbies   | AN I  |
|            | Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments                                    |   |
|            | □ Yes. Describe  | s 0   |
| <b>1</b> 0 | Firearms   |   |
| 10.        | Examples: Pistols, rifles, shotguns, ammunition, and related equipment   |   |
|            | ☐ Yes. Describe  | \$  |
| 11.        | Clothes  Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  | :   |
|            | Yes, Describe EVERY Day CLOTHES and Shows  | <u>\$ 2,500.</u> <sup>do</sup>                |
| 12.        | Jeweiry  | ed.   |
|            | Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver  |   |
|            | □ Yes. Describe  | \$  |
|            | Non-farm animals   | a.  |
|            | Examples: Dogs, cats, birds, horses  |   |
|            | ☑ No □ Yes. Describe   | s <i>O</i>                                    |
| 14.        | Any <sub>y</sub> other personal and household items you did not already list, including any health aids you did not list   |   |
|            | ☑ No   | ۸   |
|            | Yes. Give specific information.  | \$  |
| 5.         | Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here  | s_4000.00                                     |
|            |  |   |

# 196-36699 TROY 16 Filed 11/17/16

GFiled +11/17/16 Entered 11/17/16 16:08:57 Desc Main Page 15 of 51 umber (# known)

| <b>300</b> | Store | Sec. | 0.50 | 71052 | M |
|------------|-------|------|------|-------|---|
|            |       |      |      |       |   |
| 8          | :F    | П    | Ψ.   | Я     |   |
|            |       |      |      |       |   |

**Describe Your Financial Assets** 

| Do you own or have any   | y legal or equitable interest in  | any of the following?   |   | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
|--|---|---|---|--|
| 16. <b>Cash</b> <i>Examples:</i> Money you   | have in your wallet, in your ho   | me, in a safe deposit box, and on har   | d when you file your petition                       |  |
| Yes  |   |   |   | * 40° °  |
| 17. <b>Deposits of money</b> Examples: Checking, see and other see the property of | savings, or other financial acco<br>similar institutions. If you have r | unts; certificates of deposit; shares in<br>nultiple accounts with the same institu | credit unions, brokerage houses<br>tion, list each. | is   |
| Yes  |   | Institution name:   |   |  |
|  | 17.1. Checking account:   | CHASE BANK  |   | s_100.00   |
|  | 17.2. Checking account:   |   |   | \$   |
|  | 17.3. Savings account:  |   |   | \$   |
|  | 17.4. Savings account:  |   |   | \$   |
|  | 17.5. Certificates of deposit:  |   |   | ¢  |
|  | 17.6. Other financial account:  |   |   | ¢  |
|  | 17.7. Other financial account:  |   |   | Ф  |
|  | 17.8. Other financial account:  |   |   | ф  |
|  | 17.9. Other financial account:  |   |   | \$   |
|  |   |   |   | •  |
| Examples: Bond funds,  No  | or publicly traded stocks investment accounts with brok                 | erage firms, money market accounts  |   |  |
| Yes  | Institution or issuer name:   |   |   | a  |
|  |   |   |   | \$   |
|  | ***************************************                                 |   |   | \$   |
|  |   |   |   | \$   |
| 9. Non-publicly traded st<br>an LVC, partnership, a  | tock and interests in incorpo<br>and joint venture                      | rated and unincorporated business   | es, including an interest in                        |  |
| No   | Name of entity:   |   | % of ownership:                                     | $\propto$  |
| Yes. Give specific information about   |   |   | 0%%   | \$   |
| them   |   |   | 0% %  | \$   |
|  | 4-1   |   | %   | \$   |

| Non-negotiable instrum  No  | include personal chec<br>ents are those you can  | ks, cashiers' checks, promissory notes, and money orders. anot transfer to someone by signing or delivering them.   |                              |
|---|--|---|------------------------------|
| Yes. Give specific information about them                                       | Issuer name:   |   | * O                          |
|   | ***************************************  |   | \$                           |
|   |  |   | \$                           |
| Retirement or pension   |  | 4// 400// 1/ (6   |                              |
| M No  | ra, Erisa, Reogii, 40  | 1(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans   |                              |
| Yes. List each  |  |   |                              |
| account separately.   | Type of account:   | Institution name:   | (ix                          |
|   | 401(k) or similar plan:  |   | \$ <del>\</del>              |
|   | Pension plan:  |   | \$                           |
|   | IRA:   |   | ¢.                           |
|   | Retirement account:  |   | \$                           |
|   |  |   | Φ                            |
|   | Keogh:   |   | \$                           |
|   | Additional account:  |   | \$                           |
|   | Additional account:  |   |                              |
| Your share of all unused  | deposits you have ma   | de so that you may continue service or use from a company   | \$                           |
| Your share of all unused<br>Examples: Agreements of<br>companies, or others     | deposits you have ma<br>with landlords, prepaid  | de so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications   | \$                           |
| Your share of all unused<br>Examples: Agreements of<br>companies, or others     | deposits you have ma<br>with landlords, prepaid  | de so that you may continue service or use from a company   | \$                           |
| Your share of all unused<br>Examples: Agreements of<br>companies, or others     | deposits you have ma<br>with landlords, prepaid<br>Insti   | de so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications   | s                            |
| Your share of all unused<br>Examples: Agreements of<br>companies, or others     | deposits you have ma with landlords, prepaid Insti Electric:   | de so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications   | \$                           |
| Your share of all unused<br>Examples: Agreements of<br>companies, or others     | deposits you have ma with landlords, prepaid  Insti Electric:  Gas:  Heating oil:  | de so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications   | s                            |
| Your share of all unused<br>Examples: Agreements of<br>companies, or others     | deposits you have ma with landlords, prepaid  Insti Electric:  Gas:  Heating oil:  | de so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications tution name or individual:  | s                            |
| Your share of all unused<br>Examples: Agreements of<br>companies, or others     | deposits you have ma with landlords, prepaid  Insti Electric:  Gas: Heating oil:  Security deposit on renta  | de so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications tution name or individual:  | s                            |
| Your share of all unused<br>Examples: Agreements of<br>companies, or others     | deposits you have ma with landlords, prepaid  Insti Electric:  Gas: Heating oil: Security deposit on renta   | de so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications tution name or individual:  | s                            |
| Your share of all unused Examples: Agreements of companies, or others  No       | deposits you have ma with landlords, prepaid  Insti Electric:  Gas: Heating oil: Security deposit on renta Prepaid rent: Telephone:                                | de so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications tution name or individual:  | s                            |
| Your share of all unused Examples: Agreements of companies, or others  No       | deposits you have ma with landlords, prepaid  Insti Electric: Gas: Heating oil: Security deposit on renta Prepaid rent: Telephone: Water:                          | de so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications tution name or individual:  | s                            |
| Your share of all unused<br>Examples: Agreements of<br>companies, or others     | deposits you have ma with landlords, prepaid  Insti Electric: Gas: Heating oil: Security deposit on renta Prepaid rent: Telephone: Water: Rented furniture:        | de so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications tution name or individual:  | \$\$<br>\$\$<br>\$\$<br>\$\$ |
| Your share of all unused Examples: Agreements of companies, or others  No Yes   | deposits you have ma with landlords, prepaid  Insti Electric: Gas: Heating oil: Security deposit on renta Prepaid rent: Telephone: Water: Rented furniture: Other: | de so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications tution name or individual:  | \$\$<br>\$\$<br>\$\$<br>\$\$ |
| Your share of all unused Examples: Agreements of companies, or others  No Yes   | deposits you have ma with landlords, prepaid  Insti Electric: Gas: Heating oil: Security deposit on renta Prepaid rent: Telephone: Water: Rented furniture: Other: | de so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications tution name or individual:  al unit:  money to you, either for life or for a number of years) | \$\$<br>\$\$<br>\$\$<br>\$\$ |
| Your share of all unused Examples: Agreements of companies, or others  No Yes   | deposits you have ma with landlords, prepaid  Insti Electric: Gas: Heating oil: Security deposit on renta Prepaid rent: Telephone: Water: Rented furniture: Other: | de so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications tution name or individual:  al unit:  money to you, either for life or for a number of years) | \$\$<br>\$\$<br>\$\$<br>\$\$ |
| Examples: Agreements of companies, or others  No Yes  Annuities (A contract for | deposits you have ma with landlords, prepaid  Insti Electric: Gas: Heating oil: Security deposit on renta Prepaid rent: Telephone: Water: Rented furniture: Other: | de so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications tution name or individual:  al unit:  money to you, either for life or for a number of years) | \$\$<br>\$\$<br>\$\$<br>\$\$ |

Case 16-36699770901 Filed 11/17/16 Entered 11/17/16 16:08:57 Desc Main Page 17 of 191 Page 17 Pag

| IMI NO  |   |  |   |
|---|---|--|---|
| ☑ No<br>☐ Yes   | nstitution name and description. Separatel  | y file the records of any interests.11 U.S.C. § 521  | I(c):   |
|   | noticulori namo ana description. Geparater  | y line the records of any interests. 11 U.S.C. § 321   | (i).  |
| -   |   |  | _ \$  |
| <del>.</del>  |   |  | - \$  |
|   |   |  | ą .   |
| 5. Trusts, equitable or future inte<br>exercisable for your benefit   | rests in property (other than anything li   | sted in line 1), and rights or powers  |   |
| ₩ No  |   |  | . A.  |
| Yes. Give specific information about them   |   |  | \$  |
|   | cs, trade secrets, and other intellectual   |  | incorrection of the second of |
| No No   | es, websites, proceeds from royalties and li  | censing agreements   |   |
| Yes. Give specific  |   |  | G G   |
| information about them  |   |  | \$  |
| Licenses, franchises, and other   |   |  | unigerra ng   |
| _/  | usive licenses, cooperative association hol   | dings, liquor licenses, professional licenses  |   |
| No No   |   |  | - A   |
| Yes. Give specific information about them   |   |  | \$  |
| oney or property owed to you?   |   |  | Current value of the portion you own?  Do not deduct secured  |
| .Tax∕refunds owed to you  |   |  | claims or exemptions.   |
| ,   |   |  |   |
| . Tax/refunds owed to you ☑ No ☑ Yes. Give specific information   |   | Endoral  |   |
| No  Yes. Give specific information about them, including w  | hether  | Federal:   | claims or exemptions.   |
| <ul><li>No</li><li>☐ Yes. Give specific information</li></ul>   | hether<br>urns  | State:   | \$\$  |
| No Yes. Give specific information about them, including w you already filed the rete  | hether<br>urns  |  | claims or exemptions.   |
| No Yes. Give specific information about them, including w you already filed the retrained the tax years   | hether<br>urns  | State:   | \$\$  |
| No Yes. Give specific information about them, including w you already filed the return and the tax years  | hether<br>urns  | State:   | \$\$  |
| No  Yes. Give specific information about them, including w you already filed the retu and the tax years   | alimony, spousal support, child support, m  | State:<br>Local:   | \$\$  |
| No Yes. Give specific information about them, including w you already filed the rete and the tax years  | alimony, spousal support, child support, m  | State: Local:  aintenance, divorce settlement, property settlement   | \$\$  |
| No Yes. Give specific information about them, including w you already filed the retu and the tax years  | alimony, spousal support, child support, m  | State: Local:  aintenance, divorce settlement, property settlement, prop | \$\$  |
| No Yes. Give specific information about them, including w you already filed the retu and the tax years  | alimony, spousal support, child support, m  | State: Local:  aintenance, divorce settlement, property settlement, prop | \$sent  |
| No  Yes. Give specific information about them, including w you already filed the retu and the tax years   | alimony, spousal support, child support, m  | State: Local:  Alimony: Maintenance: Support:  | \$sssssssss   |
| No Yes. Give specific information about them, including w you already filed the retu and the tax years  | alimony, spousal support, child support, m  | State: Local:  Alimony: Maintenance: Support: Divorce settlement:  | sssssssss   |
| No See Sive specific information about them, including we you already filed the returned that and the tax years   | alimony, spousal support, child support, m  | State: Local:  Alimony: Maintenance: Support:  | \$sssssssss   |
| No  Yes. Give specific information about them, including wyou already filed the retrand the tax years   | hether urns alimony, spousal support, child support, m                                    | State: Local:  Alimony: Maintenance: Support: Divorce settlement: Property settlement: Sick pay, vacation pay, workers' compensation.  | sssssssss   |
| No  Yes. Give specific information about them, including w you already filed the return and the tax years  Family support  Examples: Past due or lump sum  No  Yes. Give specific information  Other amounts someone owes  Examples: Unpaid wages, disabili Social Security benefit | you ity insurance payments, disability benefits, ts; unpaid loans you made to someone els | State: Local:  Alimony: Maintenance: Support: Divorce settlement: Property settlement: Sick pay, vacation pay, workers' compensation.  | sssssssss   |
| Yes. Give specific information about them, including w you already filed the return and the tax years  Family support  Examples: Past due or lump sum No Yes. Give specific information  Other amounts someone owes  Examples: Unpaid wages, disabit Social Security benefit        | you ity insurance payments, disability benefits, ts; unpaid loans you made to someone els | State: Local:  Alimony: Maintenance: Support: Divorce settlement: Property settlement: Property settlement:  | sssssssss   |

| Debtor 1 | 1 | r | nt. | e | D |  |
|----------|---|---|-----|---|---|--|
|----------|---|---|-----|---|---|--|

| Desc Main |
|-----------|
|           |

| 31. Interests in insurance policies  |  |  | The second secon |
|--|--|--|--|
| •  | nce; health savings account (HSA   | ); credit, homeowner's, or renter's insurance  |  |
| No No  |  |  |  |
| Yes. Name the insurance company  | Company name:  | Beneficiary:   | Surrender or refund value:   |
| of each policy and list its value  | ·  | zenemolary.  | (2)  |
|  |  | Vicinitia de la companya de la comp   | _ \$   |
|  |  |  | \$   |
|  |  |  | <u> </u>   |
| 32. Any interest in property that is due you   | from someone who has died  |  |  |
| If you are the beneficiary of a living trust, or property because someone has died.  |  | nce policy, or are currently entitled to receive   |  |
| □ No   |  |  | <u></u>  |
| Yes. Give specific information   |  |  |  |
|  | As a statement of the management of the factor of the state of the sta |  | ,  |
| 33. Claims against third parties, whether of Examples: Accidents, employment dispute   |  |  |  |
| No No  | **************************************   |  | - A  |
| Yes. Describe each claim   |  |  | \$   |
| 34. Other contingent and unliquidated clain  | ns of every nature, including cou  | unterclaims of the debter and rights   |  |
| to set off claims  | is or every nature, moldaning con  | anterclaims of the deptor and rights   | $\Omega$   |
| Yes. Describe each claim.  | PANAMANANAN UNITERIORE CONTRACTOR |  | NAVADALIVA   |
| 35. Any financial assets you did not already  No  Yes. Give specific information   |  |  | <b>\$</b>  |
| 36. Add the dollar value of all of your entrie   | s from Part 4. including any ent   | ries for pages you have attached   | 60 0110  |
| for Part 4. Write that number here   |  |  | \$ 140.  |
|  |  |  | 1  |
|  |  |  |  |
| Part 5: Describe Any Business-l  | Related Property You Ow  | n or Have an Interest In. List any   | real estate in Part 1.   |
|  |  |  |  |
| 37. Do you own or have any legal or equitab  | ile interest in any business-relat   | ted property?  |  |
| <ul><li>M No. Go to Part 6.</li><li>☐ Yes. Go to line 38.</li></ul>  |  |  |  |
| Yes. Go to line 38.  |  |  |  |
|  |  |  | Current value of the portion you own?  |
|  |  |  | Do not deduct secured claims   |
|  |  |  | or exemptions.   |
| 38. Accounts receivable or commissions yo  | u already earned   |  |  |
| □ N <sub>0</sub>   | The second secon |  | <del>.</del>   |
| Yes. Describe  |  |  | $\bigcirc$   |
| The state of the s | таруу жана жана жана жана жана жана жана жа  |  | , , , , , , , , , , , , , , , , , , ,  |
| <ol> <li>Office equipment, furnishings, and supp<br/>Examples: Business-related computers, software</li> </ol>   |  | nes, rugs, telephones, desks, chairs, electronic device  | 20   |
| No   | , moderns, printers, copiers, rax machii   | nes, rugs, telepriories, desks, chairs, electronic device  | <del>2</del> 8   |
| Yes, Describe  | Sendmenharken verennage virmin virmin veren veran produktelisten VII. derde VIII. derde VI |  |  |
| _ 1 cs. Describe   |  |  | \$   |
| AND AND COMMENT OF THE PROPERTY OF THE PROPERT | - Charles and the Comment of the Com | -1000 + | and the second of the second o |

Doc 19 Filed 11/17/16 Entered 11/17/16 16:08:57 Desc Main Page 19 of 51 umber (# known)

| 40. Machinery, fixtures,               | equipment, supplies you use in business, and tools of your trade   |   |
|--|--|---|
| ☐ No☐ Yes. Describe                    |  |   |
|  |  | 5   |
| 41. Inventory                          |  | a kooning   |
| Yes. Describe                          |  | \$  |
| 42. Interests in partnersh             | nips or joint ventures   |   |
| Yes. Describe                          | Name of entity: % of ownership:  |   |
|  |  | \$  |
|  | %  | \$  |
|  | %  | \$  |
| 43. Customer lists, mailir             | ng lists, or other compilations  | ę   |
|  | include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?  |   |
| □ No                                   |  | M Aud 44/   |
| ☐ Yes. Desc                            | ribe   | \$:   |
| 44. Any business-related               | property you did not already list  | nearened.   |
| Yes. Give specific information         |  | \$  |
|  |  | \$  |
|  |  | \$:   |
|  |  | \$:   |
|  |  | \$  |
|  |  | \$  |
|  | of all of your entries from Part 5, including any entries for pages you have attached  | \$  |
|  | and the second of the second o |   |
| Part 6: Describe A                     | ny Farm- and Commercial Fishing-Related Property You Own or Have an Interest I<br>have an interest in farmland, list it in Part 1.   | n.  |
| 46. Do you own or have a               | ny legal or equitable interest in any farm- or commercial fishing-related property?  |   |
| No. Go to Part 7.  Yes, Go to line 47. |  |   |
| <b>△</b> 165. 00 to file 47.           |  |   |
|  |  | Current value of the portion you own?  Do not deduct secured claims |
| 47. Farm animals                       |  | or exemptions.  |
| Examples: Livestock, p                 | oultry, farm-raised fish   |   |
| ☐ No<br>☐ Yes                          |  | Anadomy   |
| □ 1es                                  |  | \$  |
|  |  | v.  |

16736699 Doc 1 Filed 11117/16 Entered 11/17/16 16:08:57 Desc Main Page 20 of 51 umber (# known)

| 48. Crops—either growing       | a or harvested  |  |  |            |
|--------------------------------|---|--|--|------------|
| □ No                           | g of harvested  |  |  |            |
| Yes. Give specific information | A 2011  |  | And Madestrick suphysics of Estimates, with equipment participation pages and the second   | \$         |
| 49. Farm and fishing equ       | ipment, implements, machinery, fixtur   |  |  | Ψ          |
| ☐ Yes                          |   |  |  |            |
|                                |   |  |  | \$         |
|                                | plies, chemicals, and feed  |  | i  |            |
| ☐ No<br>☐ Yes                  |   |  |  |            |
| <b>—</b> 165                   |   |  | and the control  | \$         |
| 51. Any farm- and commo        | ercial fishing-related property you did   |  |  |            |
| ☐ No                           |   | •  |  |            |
| Yes. Give specific             |   | The state of the s | PMP Minda North Committee on the second committee of t |            |
| information                    |   |  | 71.0 M T 1 M T 1 M T 1 M T 1 M T 1 M T 1 M T 1 M T 1 M T 1 M T 1 M T 1 M T 1 M T 1 M T 1 M T 1 M T 1 M T 1 M T   | \$         |
|                                |   | ling any entries for pages you have attached   | ······ →   | 6          |
|                                |   |  |  |            |
| Part 7: Describe               | All Property You Own or Have  | an Interest in That You Did Not Lis  | t Above  |            |
| 53. Do you have other pre      | pperty of any kind you did not already  | list?  |  | :          |
| Examples: Season tickets       | country club membership   |  |  |            |
| ☑ No                           | VIIII TOTATA PARATA TARATA |  | ***************************************  |            |
| Yes. Give specific             |   |  |  | \$         |
| information                    |   |  | Victory Victory  | \$         |
|                                |   |  |  | \$         |
| 54. Add the dollar value of    | f all of your entries from Part 7. Write t  | hat number here  | <b>→</b> [   | \$ 6       |
|                                |   |  |  |            |
|                                |   | The state of the s |  |            |
| Part 8: List the To            | otals of Each Part of this Form   | 1  |  |            |
| 55. Part 1: Total real estat   | e, line 2   |  |  | 0          |
| 56. Part 2: Total vehicles,    | line 5  | \$   |  |            |
| 57. Part 3: Total personal     | and household items, line 15  | \$ 4000.00   |  |            |
| 58. Part 4: Total financial    | assets, line 36   | s  |  | i.         |
| 59. Part 5: Total business     | related property, line 45   | \$ <u> </u>  |  |            |
| 60. Part 6: Total farm- and    | fishing-related property, line 52   | \$   |  |            |
| 61. Part 7: Total other pro    | perty not listed, line 54   | +\$  |  | 4 - 2 - 3  |
| 62. Total personal proper      | y. Add lines 56 through 61  | \$\frac{4,140.00}{140.00}\$ Copy personal prope  | erty total 👈 🕂   | \$ 4140.0° |
| 63. Total of all property or   | Schedule A/B. Add line 55 + line 62   |  |  | 4,140.00   |
|                                |   |  | L  |            |

Case 16-36699 Doc 1 Filed 11/17/16 Entered 11/17/16 16:08:57 Desc Main Page 21 of 51 Document Fill in this information to identify your case: Debtor 1 Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an (If known) amended filing Official Form 106C Schedule C: The Property You Claim as Exempt 04/16 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known). For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount. **Identify the Property You Claim as Exempt** 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption Brief description: 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Brief description: 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B. Brief description: 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No.

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Case 16-36699 Doc 1 Filed 11/17/16 Entered 11/17/16 16:08:57 Desc Main

|                                 |                         |                         | Document  | Page 22 of 51 |
|---------------------------------|-------------------------|-------------------------|-----------|---------------|
| Fill in this in                 | iformation to ident     | ify your case:          |           |               |
| Debtor 1                        | ALBERT                  | ANTHONY                 | GRIFFITH  |               |
| Debior 1                        | First Name              | Middle Name             | Last Name |               |
| Debtor 2<br>(Spouse, if filing) | Firs! Name              | Middle Name             | Last Name |               |
|                                 |                         |                         |           |               |
| United States I                 | Bankruptcy Court for tr | ne: Northern District o | THINOIS   |               |
| Case number                     |                         | ,,.,                    |           |               |
| (1) (4) (4)                     |                         |                         |           |               |
|                                 |                         |                         |           |               |

### Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

| Yes. Fill in all of                          |  | m to the court with your other schedules. You have nothing  | ing else to report on   | ı this form.   |   |
|--|--|---|---|--|---|
| List all secured clair for each claim. If mo | ms. If a creditor has rore than one creditor h | nore than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. habetical order according to the creditor's name. | Column A  Amount of claim  Do not deduct the value of collateral. | Column B  Value of collateral that supports this claim | Column C<br>Unsecure<br>portion<br>If any |
| 2.1  | 10 100 to 1 44 (A to 1 1 1 1 4 1               | Describe the property that secures the claim:   | \$  | \$   | \$  |
| Creditor's Name                              |  |   |   |  |   |
| Number Street                                |  | -   |   |  |   |
| City   | State ZIP Code                                 | As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  |   |  |   |
| Who owes the debt?                           | Check one.                                     | Nature of lien. Check all that apply.   |   |  |   |
| Debtor 1 only Debtor 2 only                  |  | An agreement you made (such as mortgage or secured car loan)  |   |  |   |

|   | ☐ Contingent   |   |  |   |
|---|--|---|--|---|
|   | ☐ Unliquidated   |   |  |   |
| City State ZIP Code                             | ☐ Disputed   |   |  |   |
| Who owes the debt? Check one.                   | Nature of lien. Check all that apply.                        |   |  |   |
| Debtor 1 only Debtor 2 only                     | An agreement you made (such as mortgage or secured car loan) |   |  |   |
| Debtor 1 and Debtor 2 only                      | Statutory lien (such as tax lien, mechanic's lien)           |   |  |   |
| At least one of the debtors and another         | ☐ Judgment lien from a lawsuit                               |   |  |   |
| At least one of the debiors and another         | Other (including a right to offset)                          |   |  |   |
| ☐ Check if this claim relates to a              |  | _   |  |   |
| community debt                                  |  |   |  |   |
| Date debt was incurred                          | Last 4 digits of account number                              | Carachiech y Madharline en chiargeann à machaill aire an dealbhail an dealbhail e Gheirigeann e na mhaill aire<br>Carachiech y Madharline en chiargeann à machaill aire an dealbhail a mhaill a mhaill a chiargeann e na mhaill   | all the constructions of position on the state of the construction | . Trait-Godd All (gray) y y y y y y y y y y y y y y y y y y   |
| 2.2   | Describe the property that secures the claim:                | \$  | \$   |   |
| Creditor's Name                                 |  |   |  |   |
|   |  | ramarra,  |  | 1   |
| Number Street                                   |  | Aller of the Control |  |   |
|   | As of the date you file, the claim is: Check all that apply  |   |  |   |
|   | ☐ Contingent   |   |  |   |
|   | ☐ Unliquidated   |   |  |   |
| City State ZIP Code                             | ☐ Disputed   |   |  |   |
| Who owes the debt? Check one.                   | Nature of lien. Check all that apply.                        |   |  | 9   |
| Debtor 1 only                                   | An agreement you made (such as mortgage or secured           |   |  |   |
| Debtor 2 only                                   | car loan)  |   |  |   |
| Debtor 1 and Debtor 2 only                      | Statutory lien (such as tax lien, mechanic's lien)           |   |  |   |
| At least one of the debtors and another         | Judgment lien from a lawsuit                                 |   |  |   |
| <b>—</b>  | Other (including a right to offset)                          | ***   |  |   |
| Check if this claim relates to a community debt |  |   |  |   |
| Date debt was incurred                          | ! ast 4 digits of account number                             | estalling programme in the second  | gorg (gyrg), main-ru arriginn y 1895-ing Elwyyprografy, ag a air al-stannillan diambha sill-hair   | t delances and was assisted that to recent delance proposition of the little in the Property Commission of the Property |
| Add the dollar value of your entries in         | Column A on this page. Write that number here:               | <b>\$</b>   |  |   |

| E CONTRACTOR DE | K                                       | <u> Case 16-3</u>               | 3669 <u>9                                  </u> | Doc 1                              | Filed 11/17/16                                     | Enter   |   | 16 16:08:57  | Desc I                                | Main   |
|---|---|---------------------------------|---|------------------------------------|--|---|---|--|---------------------------------------|--|
| Fi  | ll in this in                           | nformation to ide               | entify your                                     | case:                              | Design of the second                               |   | 3 of 51   |  |                                       |  |
|   |   | AIRFRT                          | ANT   | 17KI V                             | GRIFFITA   |   | ]   |  |                                       |  |
| De  | ebtor 1                                 | First Name                      | t (1, 1)  | ddie Name                          | Last Name  |   |   |  |                                       |  |
|   | ebtor 2                                 |                                 |   | <del></del>                        | <del></del>  |   |   |  |                                       |  |
| (S  | pouse, if filing)                       | First Name                      | Mi  | ddie Name                          | Last Name  |   |   |  |                                       |  |
| Ur  | nited States                            | Bankruptcy Court fo             | or the: North                                   | ern District of                    | f Illinois   |   |   |  |                                       |  |
| C.  | ase number                              |                                 |   |                                    |  |   |   |  |                                       | Check if this is an  |
|   | known)                                  |                                 |   | ••                                 | <del>4.,</del>                                     |   |   |  | i                                     | amended filing   |
| Manageria   |   |                                 |   |                                    |  |   | -   |  |                                       |  |
| Of  | fficial F                               | orm 106E                        | E/F   |                                    |  |   |   |  |                                       |  |
| S   | chedi                                   | ule F/F- (                      | Credit  | tors W                             | ho Have U  | nseci   | ured CI   | aims   |                                       | 12/15  |
|   | JII CUI                                 |                                 | OI CUIT   |                                    | IIO IIGWC O  | 11300   |   | <b>C</b> 11113   |                                       | ######################################   |
|   |   |                                 |   |                                    | for creditors with P                               |   |   |  |                                       |  |
| List  | t the other<br>!· Property              | party to any exe                | ecutory cor<br>(∩6∆/R) and                      | ntracts or un<br>Lon <i>Schedu</i> | expired leases that one<br>le G: Executory Control | could resul   | t in a claim. <i>I</i><br>Unexpired Lea                               | Also list executory<br>ases (Official Form   | 106G). Do                             | on <i>Schedul</i> e<br>not include anv   |
| cre   | ditors with                             | partially secure                | ed claims tl                                    | hat are listed                     | I in Schedule D: Cred                              | ditors Who  | Have Claims   | Secured by Proper  | ty. If more                           | space is   |
| nee   | ded, copy                               | the Part you ne                 | ed, fill it ou                                  | it, number th                      | e entries in the boxe                              | s on the le   | ft. Attach the  | Continuation Page  | to this pa                            | ge. On the top of  |
| any   | additiona                               | I pages, write yo               | our name a                                      | nd case num                        | iber (if known).                                   |   |   |  |                                       |  |
| Pa  | 73 18 Li:                               | st All of Your I                | PRIORITY  | Unsecure                           | d Claims   |   |   |  |                                       |  |
|   |   | - JFA 1                         |   |                                    |  |   |   |  |                                       |  |
|   | p                                       | editors have pric               | ority unsec                                     | urea ciaims                        | against you?                                       |   |   |  |                                       |  |
|   | <ul><li>W No. Go</li><li>Yes.</li></ul> | to Part 2.                      |   |                                    |  |   |   |  |                                       |  |
| 1000  | the part of the second of the           |                                 | conurad ala                                     | nime It a cro                      | ditor has more than or                             | o priority u  | ncecured claim  | liet the creditor ea   | acately for                           | each claim For   |
| 2.  | each claim                              | i listed, identify wi           | hat type of c                                   | claim it is. If a                  | claim has both priority                            | and nonpr   | iority amounts,   | , list that claim here   | and show b                            | oth priority and   |
|   | nonpriority                             | amounts. As mu                  | ch as possil                                    | ole, list the cla                  | aims in alphabetical or                            | der accordi   | ng to the credit  | tor's name. If you ha  | ive more th                           | an two priority  |
| 1.3 255.5   |   |                                 |   | 3.5 - 3.5 (3.5 Table 1.3 3.5 )     | art 1. If more than one                            |   |   |  | creditors if                          | теп з.   |
|   | (For an ex                              | pianation or each               | type of clair                                   | m, see me ins                      | structions for this form                           | in the instit   | uction booklet.   | )<br>Total claim   | Priorit                               | y Nonpriority  |
|   | _                                       |                                 |   | Λ                                  |  |   |   |  | amoui<br>ص ار ا                       | nt \ amount  |
| 2.1   | lhia                                    | republika                       | MADILA  | Jervice                            |  |   | 099   | 1) 4500  | , 45                                  | 11° A  |
|   | Priority Cred                           | ditor's Name                    | -10/100   | CICKILL                            | Last 4 digits of accor                             | unt number  | <u> </u>  | <u> </u>   | \$ <u></u>                            | <u>; V.</u> \$   |
|   | P                                       | Rox 43                          | 11206   | )                                  | When was the debt in                               | ncurred?  | 2012  |  |                                       |  |
|   | Number                                  | Street                          |   |                                    |  |   |   |  |                                       |  |
|   | Taus                                    | OUT IE L                        | 24 11.00  | 12 10 10                           | As of the date you fil                             | e, the claim  | is: Check all tha   | at apply.  |                                       |  |
|   | City                                    | SVILL F                         | State Z   | / リー / はん/(/<br>IP Code            | Contingent   |   |   |  |                                       |  |
|   | •                                       | word the debt2 C                |   | 0000                               | Unliquidated                                       |   |   |  |                                       |  |
|   | Debto                                   | urred the debt? Ci              | neck one.                                       |                                    | ☐ Disputed   |   |   |  |                                       |  |
|   | Debto                                   |                                 |   |                                    | Type of PRIORITY u                                 | insecured   | claim:  |  |                                       |  |
|   | Debto                                   | r 1 and Debtor 2 onl            | ly  |                                    | Domestic support o                                 |   |   |  |                                       |  |
|   | At leas                                 | st one of the debtors           | s and another                                   | •                                  | Taxes and certain of                               |   | ou owe the gover  | nment  |                                       |  |
|   | ☐ Chec                                  | k if this claim is f            | or a commu                                      | nity debt                          | Claims for death or                                | personal inju   | ıry while you wer   | e  |                                       |  |
|   | is the cla                              | im subject to offs              | set?  |                                    | intoxicated  |   |   |  |                                       |  |
|   | ☐ No                                    |                                 |   |                                    | Other. Specify                                     |   |   | namamamama meme  |                                       |  |
|   | Yes                                     |                                 | E E LA PRESENTA NATURA NEMBRANDO ANTICA         |                                    |  | entalis en 1900 de la compansión de la comp | Derkken gleg sentmette mit entleftelse formtiligegilde samt geste for | ontide i la cine de la | tinetastaetatis pelynomizaniski) puli | tone sign subtraction the contract to Associate the Associate to Associate the Contract to Associate the Associate |
| 2.2   |   |                                 | · · · · · · · · · · · · · · · · · · ·           |                                    | Last 4 digits of accor                             | unt number  | ·   | <u> </u>   | \$                                    | \$\$   |
|   | Priority Cred                           | ditor's Name                    |   |                                    | When was the debt in                               | ncurred?  |   | nou  |                                       |  |
|   | Number                                  | Street                          |   |                                    |  |   |   |  |                                       |  |
|   | ****                                    |                                 |   |                                    | As of the date you fil                             | le, the claim   | is: Check all the   | at apply.  |                                       |  |
|   |   |                                 |   |                                    | Contingent   |   |   |  |                                       |  |
|   | City                                    |                                 | State Z   | IP Code                            | Unliquidated                                       |   |   |  |                                       |  |
|   |   | urred the debt? C               | heck one.                                       |                                    | ☐ Disputed   |   |   |  |                                       |  |
|   | Debto                                   | •                               |   |                                    | Type of PRIORITY (                                 |   | claim:  |  |                                       |  |
|   |   | r 2 only<br>r 1 and Debtor 2 on | ılv   |                                    | Domestic support of                                | -   |   |  |                                       |  |
|   |   | st one of the debtor            |   | Г                                  | Taxes and certain of                               | -   | =   |  |                                       |  |
|   |   | k if this claim is f            |   |                                    | Claims for death or intoxicated                    | personal inju   | ıry while you wer   | e  |                                       |  |
|   |   | im subject to off               |   | •                                  | Other. Specify                                     |   |   |  |                                       |  |
|   | Is the cia                              | inii Subject to OTI             | oct:  |                                    | - Other, Opening                                   | Agustiga (gandyan da ligan da ligan da gasta tagan da ligan da gasta da gasta da gasta da gasta da gasta da ga  | .,  |  |                                       |  |
|   | Yes                                     |                                 |   |                                    |  |   |   | · · · · · · · · · · · · · · · · · · ·  |                                       |  |

Adse 16 36699 N DOONLY ENERGIA/117/16

Entered 11/17/16 16:08:57 Page 24 of 51

Desc Main

ist All of Your NONPRIORITY Unsecured Claims

|   | List All of Your NONPRIORITY Offsecured Claims   |  |                       |
|---|--|--|-----------------------|
| 3.  | Do any creditors have nonpriority unsecured claims against you No. You have nothing to report in this part. Submit this form to the Yes  |  |                       |
| \$0.\d  | List all of your nonpriority unsecured claims in the alphabetical or<br>nonpriority unsecured claim, list the creditor separately for each claim<br>included in Part 1. If more than one creditor holds a particular claim, li<br>claims fill out the Continuation Page of Part 2. | For each claim listed, identify what type of claim it is. Do not   | list claims already   |
| 4.1   | 1 AmeriCash  | Last 4 digits of account number  | Total claim           |
|   | Nonpriority Creditor's Name 38-1 STRECT  | When was the debt incurred?  | 1,200,0               |
| :   | CHICAGO, IL COLO State ZIP Code  | As of the date you file, the claim is: Check all that apply.   | ,,                    |
| 100 P | Who incurred the debt? Check one.  Debtor 1 only   | Contingent Unliquidated Disputed   |                       |
|   | Debtor 2 only Debtor 1 and Debtor 2 only   | Type of NONPRIORITY unsecured claim:   |                       |
|   | At least one of the debtors and another  Check if this claim is for a community debt   | <ul> <li>Student loans</li> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul> |                       |
|   | Is the claim subject to offset?  ☑ No ☑ Yes  | Debts to pension or profit-sharing plans, and other similar debts  Other. Specify PAY DAY LOAN   |                       |
| 4.2   | BOSE CORPORATION  Nonpriority Creditor's Name  THE MOUNTAIN  | Last 4 digits of account number $\frac{9093}{\sqrt{3014}}$<br>When was the debt incurred? $\frac{903014}{\sqrt{3014}}$                             | s_350.                |
|   | FRAMINGHAM, MA 01701-9168  | As of the date you file, the claim is: Check all that apply.   |                       |
|   | City State ZIP Code  Wile incurred the debt? Check one.  Debtor 1 only   | Contingent Unliquidated Disputed   |                       |
|   | Debtor 2 only Debtor 1 and Debtor 2 only   | Type of NONPRIORITY unsecured claim:   |                       |
|   | ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt  | <ul> <li>Student loans</li> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul> |                       |
|   | Is the claim subject to offset?  ☑ No □ Yes  | Debts to pension or profit-sharing plans, and other similar debts Other, Specify HEAD JET  |                       |
| 4.3   | GENESIS CREDIT GOBANK CARD  Nonpriority Creditor's Name  P.O. BOX 4499  Number Street  | Last 4 digits of account number 5 6 2 0 When was the debt incurred?  | s 1630.00<br>1,030.00 |
|   | BEARTON, OR 97076-449 City State ZIP Code  | As of the date you file, the claim is: Check all that apply.   |                       |
|   | Who incurred the debt? Check one.  ☑ Debtor 1 only ☐ Debtor 2 only   | ✓ Contingent ✓ Unliquidated ☐ Disputed   |                       |
|   | Debtor 1 and Debtor 2 only At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:   |                       |
|   | Check if this claim is for a community debt  | <ul> <li>Student loans</li> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul> |                       |
|   | Is the claim subject to offset? ☑ No ☑ Yes   | Debts to pension or profit-sharing plans, and other similar debts  Other. Specify PHONE BILL TV  |                       |

# Doc 10 Filed 11/17/16 Entered 11/17/16 16:08:57 Desc Main Last Name Document Page 25 of 51

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| Afte | r listing any entries on this page, number them beginning with 4.4,   | followed by 4.5, and so forth.   | Total claim   |
|------|---|--|---|
| 4.4  | SPRINT do DIVERSIFICO CONSULTANO  | Last 4 digits of account number  | \$ 1940°  |
|      | Nonpriority Creditor's Name 55/268  | When was the debt incurred? 2015   | ` <del>-}</del>   |
|      | Number Street JACKSONVILLE F-L 32255  | As of the date you file, the claim is: Check all that apply.   |   |
|      | City State ZIP Code   | Contingent   |   |
|      | Who incurred the debt? Check one.   | ☐ Unliquidated ☐ Disputed  |   |
|      | Debtor 1 only   |  |   |
|      | Debtor 2 only Debtor 1 and Debtor 2 only  | Type of NONPRIORITY unsecured claim:  Student loans  |   |
|      | ☐ At least one of the debtors and another   | Obligations arising out of a separation agreement or divorce that  |   |
|      | ☐ Check if this claim is for a community debt   | you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts |   |
|      | Is the claim subject to offset?   | Other. Specify Cable / CEUUINE   |   |
|      | □ Yes   |  |   |
|      | washee and a ballation and the state of the |  | ncernanista nastaka katana katana nasta katana k |
| 4.5  | T-MOBILE  | Last 4 digits of account number $8 8 9 9 9$  | \$319. °  |
|      | Nonpriority Creditor's Name RO, BOX 742596  | When was the debt incurred? 2015   |   |
|      | Number Street   | As of the date you file, the claim is: Check all that apply.   |   |
|      | CIN CINNATI, OH 452/4-0570 State ZIP Code   | Contingent   |   |
|      | Who incurred the debt? Check one.   | ☐ Unliquidated ☐ Disputed  |   |
|      | Debtor 1 only   |  |   |
|      | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only  | Type of NONPRIORITY unsecured claim:  Student loans  |   |
|      | ☐ At least one of the debtors and another   | ☐ Obligations arising out of a separation agreement or divorce that                                      | *, ***********************************  |
|      | ☐ Check if this claim is for a community debt   | you did not report as priority claims  Debts to pension or profit-sparing plans, and other similar debts |   |
|      | Is the claim subject to offset?   | Other Specify 4G BOOSTER EAWIP   |   |
|      | ☑ No ☐ Yes  |  |   |
| 4.6  |   |  | s 570.0   |
|      | U. J. Cellula Rego DYNAMIC Recover  | Lest 4 digits of account number 1 7 0 0  | \$ 0 / 0 /  |
|      | RO. Box 25759   | When was the debt incurred? 2015   | :   |
|      | GREENVILLE, SC 29616-0759   | As of the date you file, the claim is: Check all that apply.   | :   |
|      | City State ZIP Code   | Contingent Unliquidated  | :   |
|      | Who incurred the debt? Check one.   | Disputed   |   |
|      | Debtor 1 only Debtor 2 only   | Type of NONPRIORITY unsecured claim:   |   |
|      | Debtor 1 and Debtor 2 only  | Student loans  |   |
|      | At least one of the debtors and another   | Obligations arising out of a separation agreement or divorce that you did not report as priority claims  |   |
| -    | Check if this claim is for a community debt   | Debts to pension or profit-sharing plans, and other similar debts  |   |
|      | Is the claim subject to offset?  No  Yes  | Other. Specify CELLWLA/~   |   |
|      |   |  |   |

| Your PRIORITY Onsecured Claims   |  |  |  |  |
|--|--|--|--|--|
| listing any entries on this page, number them  | beginning with 2.3, followed by 2.4, and so forth.   | Total claim  | Priority amount  | Nonpric<br>amount                            |
| VERIZON WIRELES  | Last 4 digits of account number 0 0 1  | * 1734°  | \$   | s 170  |
| Provity Creditor's Name<br>P.O. BUX 26055  | When was the debt incurred? $04/2009$  |  |  |  |
| Number Street  | As of the date you file, the claim is: Check all that apply.   |  |  |  |
| MINNEAPOLIS, MN 55426  | ☐ Contingent   |  |  |  |
| Dity State ZIP Code  | ☐ Unliquidated   |  |  |  |
| •  | Disputed   |  |  |  |
| Who incurred the debt? Check one.  | NON-   |  |  |  |
| Debtor 1 only Debtor 2 only  | Type of PRIORITY unsecured claim:  |  |  |  |
| Debtor 1 and Debtor 2 only   | <ul> <li>Domestic support obligations</li> <li>Taxes and certain other debts you owe the government</li> </ul> |  |  |  |
| At least one of the debtors and another  | Claims for death or personal injury white you were   |  |  |  |
| Check if this claim is for a community debt  | intoxicated  Other. Specify  |  |  |  |
| s the claim subject to offset?   |  |  |  |  |
| ☐ No<br>☐ Yes  |  |  |  |  |
|  |  | namen (vez er e e e e e e e e e e e e e e e e e  | ######################################                           | de-carrieri de sancial de desiral de carrier |
| Priority Creditor's Name   | Last 4 digits of account number  | \$   | \$   | \$   |
|  | When was the debt incurred?  |  |  |  |
| Number Street  | As of the date you file, the claim is: Check all that apply.   |  |  |  |
|  | ☐ Contingent   |  |  |  |
| City State ZIP Code  | Unliquidated   |  |  |  |
| Albertaneous date debt Charles   | ☐ Disputed   |  |  |  |
| Who incurred the debt? Check one.  Debtor 1 only   | Type of PRIORITY unsecured claim:  |  |  |  |
| Debtor 2 only  | ☐ Domestic support obligations   |  |  |  |
| Debtor 1 and Debtor 2 only   | Taxes and certain other debts you owe the government   |  |  |  |
| At least one of the debtors and another  | Claims for death or personal injury while you were   |  |  |  |
| Check if this claim is for a community debt  | intoxicated  Other. Specify  |  |  |  |
| s the claim subject to offset?   |  |  |  |  |
| □ No   |  |  |  |  |
| Yes Color Color Color Color Color Color (Application of Color Colo |  | ntites, transporter de service de permetenta en merco anticonocione de la composición de la composició | altonosis-lastensis ekstaation ila battantiak ito-eth-battantiak | egybejskiss-kusenieks besüdekskala           |
| Priority Creditor's Name   | Last 4 digits of account number  | \$   | \$   | \$   |
| Number Street  | When was the debt incurred?  |  |  |  |
| sunds offer  | As of the date you file, the claim is: Check all that apply.   |  |  |  |
|  | ☐ Contingent   |  |  |  |
| City State ZIP Code  | Unliquidated   |  |  |  |
| Who incurred the debt? Check one.  | ☐ Disputed   |  |  |  |
| Debtor 1 only  | Type of PRIORITY unsecured claim:  |  |  |  |
| Debtor 2 only  | ☐ Domestic support obligations   |  |  |  |
| Debtor 1 and Debtor 2 only   | Taxes and certain other debts you owe the government   |  |  |  |
| At least one of the debtors and another  | Claims for death or personal injury while you were intoxicated   | , a ti s material servicio a cica adolesia con construir de construir de construir de construir de construir d   |  |  |
| Check if this claim is for a community debt  | Other. Specify   |  |  |  |
| s the claim subject to offset?   |  |  |  |  |
| □ No   |  |  |  |  |

Case 16-36699

Doc 1

Filed 11/17/16

Entered 11/17/16 16:08:57 Page 27 of 51

Desc Main

Part 3:

List Others to Be Notified About a Debt That You Already Listed

| U  |  | On which entry in Part 1 or Part 2 did you list the original creditor?   |
|--|--|--|
| Name   |  |  |
|  |  | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  |
| Number Shreet  |  | Part 2: Creditors with Nonpriority Unsecured Clain   |
| <del>\</del>   |  | Last 4 digits of account number  |
| Λ.L.   | State ZIP Code   | The state of the s |
| City<br>come specificação antionido entrologica interior natural   | engand on macontinua meneral annomazioni cida et ribilita di petita di petita di petita in minima della mana d   |  |
| Name   |  | On which entry in Part 1 or Part 2 did you list the original creditor?   |
|  |  | Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims   |
| Number Street  |  | ☐ Part 2: Creditors with Nonpriority Unsecured   |
|  |  | Claims   |
|  |  | Last 4 digits of account number  |
| City   | State ZIP Code   | Last 4 digits of account number  |
| and the second s       |  | On which entry in Part 1 or Part 2 did you list the original creditor?   |
| Name   |  |  |
|  |  | Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims   |
| Number Street  |  | Part 2: Creditors with Nonpriority Unsecured   |
|  |  | Claims   |
|  |  | Last 4 digits of account number  |
| City<br>occupies de proprieta de la compressa de la com<br>Occupia de la compressa d | State ZIP Còcle  |  |
| Name   |  | On which entry in Part 1 or Part 2 did you list the original creditor?   |
| rianio   |  | Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims   |
| Number Street  |  | Part 2: Creditors with Nonpriority Unsecured   |
|  |  | Claims   |
|  |  | Last 4 digits of account number  |
| City   | State ZIP Code   | Last 4 digits of account number  |
|  |  | On which entry in Part 1 or Part 2 did you list the original creditor?   |
| Name   |  |  |
|  |  | Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims   |
| Number Street  |  | Part 2: Creditors with Nonpriority Unsecured   |
|  |  | Claims   |
| 0.1  | Citata 71D Codo  | Last 4 digits of account number  |
| City  Conformation in the contract of the cont       | State ZIP Code  Residentias data de la construcción | 15.226.1238.242.2438.2439.3439.3449.1449.1449.1449.1449.1449.1   |
| Name   |  | On which entry in Part 1 or Part 2 did you list the original creditor?   |
|  |  | Line of (Check\one):  Part 1: Creditors with Priority Unsecured Claims   |
| Number Street  |  | Part 2: Creditors with Nonpriority Unsecured   |
|  |  | Claims   |
|  |  | Last 4 digits of account number  |
| City   | State ZIP Code   |  |
|  |  | On which entry in Part 1 or Part 2 did you list the original creditor?   |
| Name   |  | \  |
|  |  | Line of (Check one): D Part 1: Creditors with Priority Unsecured Claims  |
| Number Street  |  | Part 2: Creditors with Nonpriority Unsecured   |
|  |  | Claims   |
|  |  |  |

Case 16-36699

Doc 1

Filed 11/17/16

Entered 11/17/16 16:08:57

Desc Main

Page 28 of 51

Document

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

Total claims from Part 1

- 6a. Domestic support obligations
- 6b. Taxes and certain other debts you owe the government
- 6c. Claims for death or personal injury while you were intoxicated
- 6d. Other. Add all other priority unsecured claims. Write that amount here.
- 6e. Total. Add lines 6a through 6d.

Total claim



- 6b.
- 6d.
- 6e.

Total claims from Part 2

- 6f. Student loans
- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- 6h. Debts to pension or profit-sharing plans, and other similar debts
- 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total. Add lines 6f through 6i.

Total claim

6g.

6f.

6h.

6j.

Case 16-36699 Doc 1 Filed 11/17/16 Entered 11/17/16 16:08:57 Desc Main Document Page 29 of 51

|                   |  |  |  |                 | DUCUITIC  |   | age 1                    | Z3 01 J1   |   |  |  |  |
|-------------------|--|--|--|-----------------|---|---|--------------------------|--|---|--|--|--|
| Fill in           | this in  | formation to   | identify your ca   | ase:            |   |   |                          |  |   |  |  |  |
| Debtor            |  | ALBERT   | ANTHON   | ۱)              | GRIFFIT   | #   |                          |  |   |  |  |  |
| Deptor            |  | First Name   | Middle   | e Name          | Last Nan  | ne  |                          |  |   |  |  |  |
| Debtor<br>(Spouse |  | First Name   | Middle   | e Name          | Last Nan  | ne .  |                          |  |   |  |  |  |
| United            | States I   | Bankruptcy Cour  | rt for the: Norther  | n District of   | Illinois  |   |                          |  |   |  |  |  |
| Case n            | number   |  |  |                 |   |   |                          |  |   |  | Па   | ) . (6.4)  |
| (If know          |  |  | **************************************   |                 | ······································                                |   |                          |  |   |  |  | eck if this is an ended filing   |
|                   |  |  |  |                 |   |   |                          |  |   |  |  |  |
| Offic             | ial F  | Form 106   | 3G   |                 |   |   |                          |  |   |  |  |  |
|                   |  |  | Executo  | m Ca            | ntranto   | and   | l lo                     | avnira   | dlas  | COC  |  | 12/15  |
|                   |  |  |  |                 |   |   |                          |  |   |  |  |  |
| informa           | ation. If  | more space   | ite as possible.<br>is needed, cop<br>ir name and cas  | y the additi    | ional page, fill  | ∍ filing tog<br>it out, nun                       | gether,<br>mber th       | both are eq<br>ne entries, a   | ually respor<br>nd attach it                                | isible for s<br>to this pag  | upplying co<br>e. On the to  | rrect<br>p of any  |
|                   | 1  |  |  |                 |   |   |                          |  |   |  |  |  |
|                   |  |  | utory contracts<br>and file this form  |                 |   | ther ached  | ules Va                  | nu hava nath   | ing alea to ro  | nort on this   | form   |  |
| -                 |  |  | and file this form<br>information belo   |                 | •   |   |                          |  | _   |  |  |  |
|                   |  |  | erson or compa   |                 |   |   |                          |  |   |  |  |  |
| exa               | ample,   | rent, vehicle<br>leases.   | lease, cell pho  | ne). See the    | e instructions fo   | r this form                                       | in the i                 | instruction bo   | ooklet for moi  | e example  | s of executor  | contracts and  |
| 41.50             |  | antos (Policies)   | eride extrively e  | des edebbe di   |   | dalik dalah                                       | 1970-198                 | -<br>  |   | 262607934  |  |  |
| Pe                | rson o   | r company w  | ith whom you h   | ave the co      | ntract or lease   |   |                          | State what   | the contrac   | t or lease   | s for  |  |
|                   |  |  |  | transcription ( | er jaka siya siyari   | e for a service of                                |                          | Mangary a  |   |  |  |  |
| 2.1               |  |  |  |                 |   |   |                          |  |   |  |  |  |
| Na                | ame  |  |  |                 |   |   |                          |  |   |  |  |  |
| Nu                | ımber  | Street   |  |                 |   |   |                          |  |   |  |  |  |
| <u></u>           | h  |  | State  | ZIP Code        |   |   |                          |  |   |  |  |  |
| Cit               | i <b>y</b>   | e to de transcentration of the section of the secti | bedyddiglawydd charles ac charles  | ZIF COUG        | toppungsag annaga ik potratas somilas ma i thomese + s me ing a som   | er om til men fra fra fra græktiverte g           | entresentinasininte      | aring a frantis free denoted a fourth of least solve to              | فيعافه والمعاولة معامستها مستواء منهاق والمستواء بإمارا إنه |  |  | and the specific field of the state of the s |
| 2.2               |  |  |  |                 |   |   |                          |  |   |  |  |  |
| INA               | ime  |  |  |                 |   |   |                          |  |   |  |  |  |
| Nu                | umber  | Street   |  |                 |   |   |                          |  |   |  |  |  |
| Cit               | ty   |  | State  | ZIP Code        |   |   | one then be asset or the | an San i në amër në milë milio Salul Bestëkhara a                    | AND                     | neri Santana i rammini ana matani di Sila  | CATTAGO ON PERSONAL ON STONE CONTRACTOR FRANCIS                            | estantiana da la composita de  |
| 2.3               | Cold Day ( 0 + 10 + 40 2 3 4 1 2 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4 | Verificants in the fundamental production of the second  | are the second s |                 |   |   |                          |  |   |  |  |  |
| Na                | ame  |  |  |                 |   |   |                          |  |   |  |  |  |
| Ni                | ımber  | Street   |  |                 |   |   |                          |  |   |  |  |  |
|                   | a  | Guoor  |  |                 |   |   |                          |  |   |  |  |  |
| Cit               | ty   | AT CALLS AND THE DESCRIPTION OF A STREET AND   | State  | ZIP Code        | elini emelyemmen temeneli emenere espera                              | Activities (1905)                                 | TENERO DE LA SE          | kaniik A. Landiire A. A. Sillein para darmii 1911, eetyyseeli 1 A. s | antiach feò gròsich d gin ganh eighbol bhabaile air bho     | IIAININEN (MINKINEN IMI  | ar ne estanta-relatibility di imali kepilinta kiri kepilah j               | a kananina ya shirakira i kushirishi ka kanasirya kushirakiraki ya kushirishi ka kananina ka kananina ka kanan   |
| 2.4               |  |  |  |                 |   | <del></del>                                       | -                        |  |   |  |  |  |
| Na                | ame  |  |  |                 |   |   |                          |  |   |  |  |  |
| Νι                | ımber  | Street   |  |                 |   | E-MANAGEMENT                                      | -                        |  |   |  |  |  |
| Cit               | h.   |  | State  | ZIP Code        | ······································                                |   | •                        |  |   |  |  |  |
| 2.5               | ¥  |  |  | LII JOGE        | handigen gegenet wegten hand hand on styrenders was a recovered       | eller karnander det deserte kerklichte begig elle |                          | ALDELA ALDELIO I DEL PORTO DEL COMPLETO CO                           | Species projektivným mie viminim texture textu              | the contract of the property of the same o | an ann ann an aire ann an aire ann an ann an ann an ann an ann an ann an a | eminori esperanteria estado de televido de de  |
| ·                 | ame  |  |  |                 | aut Ada uut Ada Adamee aan aan aa ah aa | <del></del>                                       |                          |  |   |  |  |  |
|                   |  |  | · · · · · · · · · · · · · · · · · · ·  |                 |   |   | -                        |  |   |  |  |  |
| Nu                | umber  | Street   |  |                 |   |   |                          |  |   |  |  |  |
| Cit               | ty   |  | State  | ZIP Code        |   |   | -                        |  |   |  |  |  |

Case 16-36699 Doc 1 Filed 11/17/16 Entered 11/17/16 16:08:57 Desc Main Document Page 30 of 51 Fill in this information to identify your case: Debtor 1 First Name Middle Name Debtor 2 (Spouse, if filing) First Name Middle Name United States Bankruptcy Court for the: Northern District of Illinois Case number Check if this is an amended filing Official Form 106H Schedule H: Your Codebtors 12/15 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. Do/you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) **☑** No Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? Yes, In which community state or territory did you live? \_\_\_\_\_\_. Fill in the name and current address of that person. Name of your spouse, former spouse, or legal equivalent Number Street ZIP Code State 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 2: The creditor to whom you owe the debt Column 1: Your codebtor Check all schedules that apply: 3.1 Schedule D, line Name Schedule E/F, line \_\_\_\_ Schedule G, line \_\_\_\_ Number State 3.2 ☐ Schedule D, line Name ■ Schedule E/F, line \_\_\_\_\_ Number Street Schedule G, line City 3.3 Schedule D, line \_\_\_ Name Schedule E/F, line Schedule G, line \_\_\_\_\_ Number

page 1 of

|   | Doct   | inchi rage 51 c  | ,, OI  |  |
|---|--|--|--|--|
| Fill in this information to identify  | your case:   |  |  |  |
| Debtor 1 ALBERT A   | WIHONY GRIF  | Fith   |  |  |
| First Name  Debtor 2 (Spouse, if filing) First Name   | Middle Name  | ast Name   |  |  |
| United States Bankruptcy Court for the:   | Northern District of Illinois  |  |  |  |
| Case number   |  |  | Check if this is:  |  |
| (If known)  | <u></u>  |  | ☐ An amended filin                                       | g  |
|   |  |  | A supplement shi<br>income as of the                     | owing postpetition chapter 13 following date:  |
| Official Form 106I  | •  |  | MM / DD / YYYY   | <u></u>  |
| Schedule I: You   | ır Income  |  |  | 12/15  |
| Be as complete and accurate as posupplying correct information. If you are separated and your spouseparate sheet to this form. On the | ou are married and not filings<br>are is not filing with you, do<br>top of any additional page | g jointly, and your spouse i<br>o not include information al | is living with you, include<br>bout your spouse. If more | information about your spouse. space is needed, attach a   |
| Fill in your employment information.  |  | Debtor 1   | Debtor   | 2.01 Tron-Ming spouse  |
| If you have more than one job, attach a separate page with information about additional employers.                                    | Employment status  | <ul><li>✓ Employed</li><li>☐ Not employed</li></ul>          |  | AND JOB<br>ployed<br>employed  |
| Include part-time, seasonal, or self-employed work.   | Occupation   | SALES CLERK  | SA   | LES Clerk  |
| Occupation may include student<br>or homemaker, if it applies.  |  | Bonne San  |  | MER'S HEALTH FOOD  |
|   | Employer's name  |  | ^  |  |
|   | Employer's address   | 1512 E. 53R<br>Number Street                                 | Number   | O P. WABASH Street   |
|   | How long employed there  | 11/2 11-0  | 60615 Ch<br>City<br>34                                   | 1 CA GD, 12 60604<br>State ZIP Code  |
| Part 2: Give Details About  Estimate monthly income as of   | f the date you file this form.   | If you have nothing to report                                | t for any line, write \$0 in the                         | space. Include your non-filing   |
| spouse unless you are separated<br>If you or your non-filing spouse h<br>below. If you need more space, a                             | ave more than one employer   | , combine the information for<br>s form.                     | all employers for that person                            | on on the lines  |
|   |  |  |  | otor 2 or<br>ng spouse   |
| List monthly gross wages, sal<br>deductions). If not paid monthly   | lary, and commissions (bef<br>, calculate what the monthly v                                   | ore all payroll wage would be. 2. \$_                        | 1750.°° s_   | And of the Control of |
| 3. Estimate and list monthly ove  | rtime pay.   | 3. +\$_  | Ø + \$   |  |
| 4. Calculate gross income. Add l  | ine 2 + line 3.  | 4. \$  | 1750.°° s_   |  |

| Dehtor | 1 |
|--------|---|

Çase 16-36699 Doc 1 Filed 11/17/16 Entered 11/17/16 16:08:57 Desc Main

Page 32 of 51

Case number (if known)\_

|                 |   |             | For Debtor 1         | For Debtor 2 or non-filing spouse                |                |
|-----------------|---|-------------|----------------------|--|----------------|
| Сору            | v line 4 here=  | <b>→</b> 4. | \$ 1750°             | \$   |                |
|                 |   |             |                      |  |                |
|                 | ill payroll deductions:   | <b>-</b> -  | s 351.00             | r.   |                |
|                 | Tax, Medicare, and Social Security deductions   | 5a.<br>5b.  | \$ 001               | \$   |                |
|                 | Mandatory contributions for retirement plans  Voluntary contributions for retirement plans  | 5c.         | \$                   | \$   |                |
|                 | Required repayments of retirement fund loans  | 5d.         | \$                   | \$   |                |
|                 | Insurance   | 5e.         | \$                   | \$   |                |
| -               | Domestic support obligations  | 5f.         | \$                   | \$   | 1              |
|                 | Union dues  | 5g.         | \$                   | \$   |                |
| _               | Other deductions. Specify: LA. FITNESS BENEFIT  | 5h.         | +\$ 10.00            | + \$   | 100000         |
| 6. <b>Ad</b> d  | the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.   | 6.          | \$ 361.              | \$   |                |
| 7. Calo         | culate total monthly take-home pay. Subtract line 6 from line 4.  | 7.          | \$ 1307              | \$   |                |
| 8. List         | all other income regularly received:  |             |                      |  |                |
|                 | Net income from rental property and from operating a business, profession, or farm  |             |                      |  |                |
|                 | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.   | 8a.         | \$                   | \$   |                |
|                 | Interest and dividends  | 8b.         | \$ <u> </u>          | \$   | :              |
|                 | Family support payments that you, a non-filing spouse, or a depende regularly receive   | nt          | X                    |  |                |
|                 | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  | 8c.         | \$                   | \$   |                |
|                 | Unemployment compensation Social Security   | 8d.<br>8e.  |                      | \$   | :              |
|                 | Other government assistance that you regularly receive  | 00,         | 9                    | Ψ  |                |
|                 | Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: | ice<br>8f.  | \$                   | \$   | <br>           |
| 8g.             | Pension or retirement income  | 8g.         | \$ <i>O</i>          | \$   | :              |
| •               | Other monthly income. Specify:  | 8h.         | +\$ 8                | +\$  | :              |
|                 | l all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.   | 9.          | \$ 6                 | \$   |                |
|                 | ulate monthly income. Add line 7 + line 9.<br>the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | 10.         | \$1389.00 +          | - S =  | : \$ 1389. A   |
| Inclu<br>frien  | e all other regular contributions to the expenses that you list in Scheood de contributions from an unmarried partner, members of your household, you do or relatives.  | your d      | ependents, your room |  |                |
|                 | ot include any amounts already included in lines 2-10 or amounts that are cify:   |             |                      | ses listed in <i>Schedule J.</i><br>11. <b>+</b> | <u>\$_</u>     |
|                 | the amount in the last column of line 10 to the amount in line 11. The that amount on the Summary of Your Assets and Liabilities and Certain S  |             |                      |  | \$ 1399, and   |
| 13. <b>Do</b> / | you expect an increase or decrease within the year after you file this  | form?       | ?                    |  | monthly income |
|                 | Yes. Explain:   |             |                      |  |                |
|                 |   |             |                      |  |                |

Case 16-36699 Doc 1 Filed 11/17/16 Entered 11/17/16 16:08:57 Desc Main Document Page 33 of 51

|  | Boodmone   | 1 ago 00 of 01   |   |  |
|--|--|--|---|--|
| Debtor 1  Debtor 2 (Spouse, if filing)  United States Bankruptcy Court for the  Case number (If known) | ANTHONY GRIFFIN  Middle Name Last Name  Middle Name Last Name                            |  | nded filing<br>ment showing postp<br>s as of the following  |  |
| Official Form 106J   |  |  |   |  |
| Schedule J: Yo   | ur Expenses  |  |   | 12/15  |
| Be as complete and accurate as p   | oossible. If two married people are fili<br>ded, attach another sheet to this form<br>n. | ng together, both are equally res<br>. On the top of any additional pa | sponsible for supplyi<br>ges, write your name   | ng correct<br>e and case number  |
|  |  |  |   |  |
| 1. Is this a joint case?  No. Go to line 2.  Yes. Does Debtor 2 live in a                              |  |  |   |  |
| Yes, Debtor 2 must f   | ile Official Form 106J-2, Expenses for S   | eparate Household of Debtor 2.   | gggernajan kara ayan geragagajang se kemengahanah mahak Tabilina di adilin kilo di d | The American Annual Annual Control of the Control o |
| Do you have dependents?  Do not list Debtor 1 and Debtor 2.  | No Yes. Fill out this information for each dependent                                     | Dependent's relationship to Debtor 1 or Debtor 2                       | Dependent's age   | Does dependent live with you?  |
| Do not state the dependents' names.  |  |  |   | No Yes  |
| Do your expenses include<br>expenses of people other than<br>yourself and your dependents?             | No<br>Yes  |  |   |  |
| Part 2: Estimate Your Ongo   | oing Monthly Expenses  |  |   |  |
|  | ur bankruptcy filing date unless you a<br>ankruptcy is filed. If this is a supplem       |  |   |  |
| • •  | on-cash government assistance if you   |  | Your expe   | nses   |
|  | ed it on Schedule I: Your Income (Off<br>expenses for your residence. Include            |  | 4. \$ <u>60</u> 0   | D 30   |
| If not included in line 4:   |  |  | a a   |  |
| 4a. Real estate taxes  | and the second of  |  | 4a. \$  |  |
| 4b. Property, homeowner's, or  |  |  | 4b. \$ 0  |  |
| 4c. Home maintenance, repair   | r, and upkeep expenses   |  | 4d \$ 0   |  |

Debtor 1

Case 10-30099 DOC1 Filed 11/17/1

ALBERT ANTHONY GRIFFITH

IFINAME Middle Name Last Name

Case number (if known)

|     |   |      | Your expenses   |
|-----|---|------|---|
|     |   | 34c  | \$ 0  |
| 5.  | Additional mortgage payments for your residence, such as home equity loans  | 5.   |   |
| 6.  | Utilities:  |      | 1750  |
|     | 6a. Electricity, heat, natural gas  | 6a.  | \$ 100.   |
|     | 6b. Water, sewer, garbage collection  | 6b.  | \$ (50,00)  |
|     | 6c. Telephone, cell phone, Internet, satellite, and cable services  | 6c.  | \$ 130:   |
|     | 6d. Other. Specify:   | 6d.  | \$ <del>\( \lambda \) \( \lambda \)</del> |
| 7.  | Food and housekeeping supplies  | 7.   | \$ 200.   |
| 8.  | Childcare and children's education costs  | 8.   | \$ 71.00  |
| 9.  | Clothing, laundry, and dry cleaning   | 9.   | \$ 24.00  |
| 10. | Personal care products and services   | 10.  | \$ 40.  |
| 11. | Medical and dental expenses   | 11.  | \$ 150.   |
| 12. | Transportation. Include gas, maintenance bus or train fare.  Do not include car payments.   | 12.  | s 120.  |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books  | 13.  | \$ 10.  |
| 14. | Charitable contributions and religious donations  | 14.  | \$  |
| 15. | Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.   |      | <i>a</i> .  |
|     | 15a. Life insurance   | 15a. | \$  |
|     | 15b. Health insurance   | 15b. | \$  |
|     | 15c. Vehicle insurance  | 15c. | \$  |
|     | 15d. Other insurance. Specify:  | 15d. | \$ <u>Ø</u>   |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify: IRS Payment Plan for 2012  | 16.  | s_50, <sup>63</sup>   |
| 17. | Installment or lease payments:  |      | $\alpha$  |
|     | 17a. Car payments for Vehicle 1   | 17a. | \$  |
|     | 17b. Car payments for Vehicle 2   | 17b. | \$ 0  |
|     | 17c. Other. Specify:  | 17c. | \$  |
|     | 17d. Other. Specify:  | 17d. | \$  |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18.  | \$ <u></u>  |
| 19. | Other payments you make to support others who do not live with you.   |      | P2  |
|     | Specify:  | 19.  | \$ 10   |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income  | •    | C.  |
|     | 20a. Mortgages on other property  | 20a. | \$ 6  |
|     | 20b. Real estate taxes  | 20b. | \$  |
|     | 20c. Property, homeowner's, or renter's insurance   | 20c. | \$  |
|     | 20d. Maintenance, repair, and upkeep expenses   | 20d. | \$  |
|     | 20e. Homeowner's association or condominium dues  | 20e. | \$  |

Case number (if known) Debtor 1 Other. Specify: Calculate your monthly expenses. 22a 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. 22c. Add line 22a and 22b. The result is your monthly expenses. 22c 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. 23b 23b. Copy your monthly expenses from line 22c above. Subtract your monthly expenses from your monthly income. 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? No. lemal EXPENSE OF \$150 added in August 2016 have applied for FOOD STAMPS Yes.

Case 16-36699

Doc 1

Filed 11/17/16

**Document** 

Entered 11/17/16 16:08:57

Page 35 of 51

Desc Main

Case 16-36699 Doc 1 Filed 11/17/16 Entered 11/17/16 16:08:57 Desc Main Document Page 36 of 51 Fill in this information to identify your case: Debtor 1 Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Case number Check if this is an amended filing Official Form 106Dec **Declaration About an Individual Debtor's Schedules** 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? Yes. Name of person\_ \_. Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X Albert Anthony Orghith
Signature of Debtor 1 Signature of Debtor 2 Date MM / DD / YYYY

Case 16-36699 Doc 1 Filed 11/17/16 Entered 11/17/16 16:08:57 Desc Main Document Page 37 of 51

|                              |                           |   | Document                              | Paye 31                                 | 01 21   |   |                                  |
|------------------------------|---------------------------|---|---------------------------------------|---|---|---|----------------------------------|
| Fill in this                 | information to ide        | ntify your case:                        |                                       |   |   |   |                                  |
| Dahéar 1                     | ALBERT                    | ANTHANY                                 | GRIFFITH                              |   |   |   |                                  |
| Debtor 1                     | First Name                | Middle Name                             | Last Name                             |   |   |   |                                  |
| Debtor 2<br>(Spouse, if fili | ng) First Name            | Middle Name                             | Last Name                             |   |   |   |                                  |
|                              |                           | the: Northern District o                |                                       |   |   |   |                                  |
|                              |                           | me. Northern District o                 | 1 HRIOIS                              | :                                       |   |   |                                  |
| Case numbe<br>(If known)     | er                        |   | <u> </u>                              |   |   |   | Check if this is an              |
|                              |                           |   | · · · · · · · · · · · · · · · · · · · |   |   |   | amended filing                   |
|                              |                           |   |                                       |   |   |   |                                  |
| Official                     | Form 407                  |   |                                       |   |   |   |                                  |
|                              | Form 107                  |   |                                       |   |   |   |                                  |
| Staten                       | nent of Fir               | nancial Affai                           | rs for Indiv                          | iduals l                                | Filing for B  | ankruptcy                               | 04/16                            |
| Be as comp                   | lete and accurate         | as possible. If two mar                 | ried people are filin                 | g together, bo                          | th are equally respo                                  | onsible for supplying                   | ng correct                       |
| information                  | . If more space is        | needed, attach a separ                  | ate sheet to this for                 | m. On the top                           | of any additional p                                   | ages, write your na                     | me and case                      |
| number (n k                  | (nown). Answer ev         | ery question.                           |                                       |   |   |   |                                  |
| Part 1:                      | Give Details Ah           | out Your Marital Sta                    | atus and Whoro V                      | ou Lived Ref                            | foro  |   |                                  |
|                              | One Details AD            | Suc I Vas Indition See                  | 103 and where 1                       | od Liveu Dei                            | ore   |   |                                  |
| 1. What is                   | your current mari         | tal status?                             |                                       |   |   |   |                                  |
|                              |                           |   |                                       |   |   |   |                                  |
| ☐ Mar                        | ried<br>married           |   |                                       |   |   |   |                                  |
| CAR INCL                     | manicu                    |   |                                       |   |   |   |                                  |
| 2. During                    | the last 3 years, ha      | ve you lived anywhere                   | other than where v                    | ou live now?                            |   |   |                                  |
| M No                         | •                         | , , , ,                                 | ,                                     |   |   |   |                                  |
|                              | . List all of the place   | s you lived in the last 3               | vears. Do not include                 | where you live                          | e now.  |   |                                  |
| : 11                         | erenne green by the beegn | VERBUSELAUS (NETES AND                  | al garage care concerns               | To Nova expension                       | a pyliter (research a Fiord).                         |   |                                  |
| De                           | ebtor 1:                  |   | Dates Debtor 1 lived there            | Debtor 2:                               |   |   | Dates Debtor 2 lived there       |
|                              |                           |   |                                       |   |   |   |                                  |
| r                            | -0112 8 D                 |   |                                       | Same as D                               | ebtor 1   |   | Same as Debtor 1                 |
|                              | 5043 S. K                 | 3CMC                                    | From 2007                             | <b>;</b>                                |   |   | From                             |
| N                            | umber Street              |   | to Present                            | T Number 5                              | Street  |   | To                               |
|                              | NPT # 1                   |   |                                       |   |   |   | 10                               |
| (°                           | HICAGO . 11               | - 606 M                                 |                                       |   |   |   |                                  |
| č                            | ity                       | State ZIP Code                          | <del></del>                           | City                                    | Stat  | e ZIP Code                              |                                  |
|                              | ,,.,.,                    |   | ,                                     |   |   | *************************************** |                                  |
|                              |                           |   |                                       | Same as D                               | ebtor 1   |   | ☐ Same as Debtor 1               |
|                              | umber Street              |   | From                                  | ***                                     | No.   |   | From                             |
| 14                           | umber Street              |   | То                                    | Number 5                                | street  |   | То                               |
|                              |                           | 41 - 11 - 11 - 11 - 11 - 11 - 11 - 11 - |                                       | *************************************** |   |   |                                  |
|                              |                           |   |                                       |   |   |   |                                  |
| c                            | ity                       | State ZIP Code                          |                                       | City                                    | Stal  | e ZIP Code                              |                                  |
| 3 Within 6                   | the last 8 vectore dis    | d you ever live with a s                | nouse or local occi-                  | valent in a acc                         | nmunitu necesarie                                     | into or townit o (C                     | ommunita                         |
| stațes a                     | nd territories include    | e Arizona, California, Ida              | sho, Louisiana, Nevad                 | da, New Mexico                          | ה <b>munity property s</b> i<br>ס, Puerto Rico, Texas | s, Washington, and                      | ommunity property<br>Wisconsin.) |
| ☑ No                         |                           |   |                                       |   |   | _                                       | ·                                |
| Yes.                         | Make sure you fill o      | out Schedule H: Your Co                 | odebtors (Official Form               | n 106H).                                |   |   |                                  |
|                              |                           |   |                                       |   |   |   |                                  |
|                              |                           |   |                                       |   |   |   |                                  |
| Part 2:                      | xplain the Source         | es of Your Income                       |                                       |   |   |   |                                  |

Entered 11/17/16 16:08:57 Desc Main ge 38 of 51

Case number (if known)\_

Debtor 1

| Case 10-        | 30099    | DOC T     | Llien TT/T1/T0 |    |
|-----------------|----------|-----------|----------------|----|
| ABERG           | AN       | THONY     | Document J     | Pa |
| First Name Midd | lle Name | Last Name |                |    |

| If you are filing a joint case and you have inc  | ome that you receive toge  |   |   |   |
|--|--|---|---|---|
| Yes. Fill in the details.  |  |   |   |   |
|  | Debtor 1   |   | Debtor 2  |   |
|  | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions)   | Sources of income<br>Check all that apply.  | Gross income<br>(before deductions and<br>exclusions)   |
| From January 1 of current year until the date you filed for bankruptcy:  | Wages, commissions, bonuses, tips  Operating a business  | <u> 19, 399</u>   | <ul><li>☐ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul>  | \$  |
| For last calendar year: (January 1 to December 31, 2015  | Wages, commissions, bonuses, tips  Operating a business  | s21,337   | ☐ Wages, commissions, bonuses, tips☐ Operating a business   | \$  |
| , m  | Operating a business   |   | Operating a business  | s   |
|  |  | s.1   | Wages, commissions,   |   |
| For the calendar year before that:  (January 1 to December 31, 2)  Did you receive any other income during the line of the lin | come is taxable. Examples<br>nents; pensions; rental inco<br>g a joint case and you have   | of other income are alinome; interest; dividends; e income that you receive   | bonuses, tips  Operating a business  nony; child support; Social money collected from lawsed together, list it only once  | suits; royalties; and   |
| Did you receive any other income during to Include income regardless of whether that incume unemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from the No   | bonuses, tips  Operating a business  his year or the two previous come is taxable. Examples nents; pensions; rental income a joint case and you have   | of other income are alinome; interest; dividends; e income that you receive   | bonuses, tips  Operating a business  nony; child support; Social money collected from lawsed together, list it only once  | suits; royalties; and   |
| Did you receive any other income during to Include income regardless of whether that incument unemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from the  | bonuses, tips  Operating a business  his year or the two previous come is taxable. Examples nents; pensions; rental income a joint case and you have   | of other income are alinome; interest; dividends; e income that you receive   | bonuses, tips  Operating a business  nony; child support; Social money collected from lawsed together, list it only once  | suits; royalties; and   |
| Did you receive any other income during to Include income regardless of whether that incume unemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from the No   | bonuses, tips  Operating a business  his year or the two previous  come is taxable. Examples  nents; pensions; rental incomerts; pensions; rental incomerts, pensions; | of other income are alinome; interest; dividends; e income that you receive   | bonuses, tips  Operating a business  nony; child support; Social money collected from laws ed together, list it only once t you listed in line 4.   | suits; royalties; and   |
| Did you receive any other income during the Include income regardless of whether that incume unemployment, and other public benefit paying gambling and lottery winnings. If you are filling List each source and the gross income from the No Yes. Fill in the details.  From January 1 of current year until   | bonuses, tips  Operating a business  his year or the two previous come is taxable. Examples nents; pensions; rental income g a joint case and you have each source separately. De  Debtor 1  Sources of income   | of other income are alinome; interest; dividends; e income that you receive not include income that  Gross income from each source (before deductions and exclusions)   | bonuses, tips Operating a business  nony; child support; Social money collected from lawsed together, list it only once tyou listed in line 4.  Debtor 2  Sources of income Describe below.   | suits; royalties; and e under Debtor 1.  Gross income from each source (before deductions and |
| Did you receive any other income during the Include income regardless of whether that incurrently and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from the No Yes. Fill in the details.   | bonuses, tips  Operating a business  his year or the two previous come is taxable. Examples nents; pensions; rental income g a joint case and you have each source separately. De  Debtor 1  Sources of income   | Gross income from each source (before deductions)  Gross income from each source (before deductions and exclusions)   | bonuses, tips Operating a business  nony; child support; Social money collected from lawsed together, list it only once tyou listed in line 4.  Debtor 2  Sources of income Describe below.   | suits; royalties; and e under Debtor 1.  Gross income from each source (before deductions and |
| Did you receive any other income during the Include income regardless of whether that include income regardless of which include income regardless of | bonuses, tips  Operating a business  his year or the two previous come is taxable. Examples nents; pensions; rental income g a joint case and you have each source separately. De  Debtor 1  Sources of income   | of other income are alinome; interest; dividends; e income that you receive not include income that  Gross income from each source (before deductions and exclusions)   | bonuses, tips Operating a business  nony; child support; Social money collected from lawsed together, list it only once tyou listed in line 4.  Debtor 2  Sources of income Describe below.   | Gross income from each source (before deductions and exclusions)                              |
| Did you receive any other income during the Include income regardless of whether that include income regardless of which include income regardless of | bonuses, tips  Operating a business  his year or the two previous come is taxable. Examples nents; pensions; rental income g a joint case and you have each source separately. De  Debtor 1  Sources of income   | Gross income from each source (before deductions and exclusions)  \$\begin{array}{c} \text{Gross income from each source} \text{(before deductions and exclusions)} \end{array}   | bonuses, tips Operating a business  nony; child support; Social money collected from lawsed together, list it only once tyou listed in line 4.  Debtor 2  Sources of income Describe below.   | Gross income from each source (before deductions and exclusions)                              |
| Did you receive any other income during the Include income regardless of whether that incume unemployment, and other public benefit paying gambling and lottery winnings. If you are filling List each source and the gross income from the No Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:  | bonuses, tips  Operating a business  his year or the two previous come is taxable. Examples nents; pensions; rental income g a joint case and you have each source separately. De  Debtor 1  Sources of income   | Gross income from each source (before deductions)  \$\frac{1}{5}\$  \$\frac{1}{5}\$  \$\frac{1}{5}\$  \$\frac{1}{5}\$  \$\frac{1}{5}\$  \$\frac{1}{5}\$  \$\frac{1}{5}\$  \$\frac{1}{5}\$  \$\frac{1}{5}\$  \$\frac{1}{5}\$ | bonuses, tips Operating a business  nony; child support; Social money collected from laws ed together, list it only once t you listed in line 4.  Debtor 2  Sources of income Describe below. | Gross Income from each source (before deductions and exclusions)                              |

Debtor 1

Case 16-36699 Doc 1 Filed 11/17/16 Entere
ALBIER ANTHONY GRIFFIN

Entered 11/17/16 16:08:57 Desc Main Page 39 of 51

| Case number (if | known) |
|-----------------|--------|
|-----------------|--------|

Part 3:

#### List Certain Payments You Made Before You Filed for Bankruptcy

| Are eithe | er Debtor 1's or Debtor 2's debts prima   | ily consumer deb   | ts?   |  |                      |
|-----------|---|--|---|--|----------------------|
| ☐ No.     | Neither Debtor 1 nor Debtor 2 has prim  | arily consumer de<br>ersonal, family, or h   | ebts. Consumer debts are nousehold purpose."  | defined in 11 U.S.C. § 101(  | (8) as               |
|           | During the 90 days before you filed for ba  | nkruptcy, did you p  | ay any creditor a total of \$   | 6,425* or more?  |                      |
|           | No. Go to line 7.   |  |   |  |                      |
| Ą         | Yes, List below each creditor to whom total amount you paid that credite child support and alimony. Also, | or. Do not include p   | ayments for domestic sup  | port obligations, such as  |                      |
| 7         | * Subject to adjustment on 4/01/19 and ev   |  | •   | •  |                      |
| Yes. I    | Debtor 1 or Debtor 2 or both have prim  | arily consumer de  | bts.  |  |                      |
|           | During the 90 days before you filed for ba  |  |   | 600 or more?   |                      |
| 1         | No. Go to line 7.   |  |   |  |                      |
|           | Yes. List below each creditor to whom creditor. Do not include payment: alimony. Also, do not include pay | s for domestic supp  | ort obligations, such as ch   | nild support and   | Was this payment for |
|           |   |  |   |  |                      |
|           | Creditor's Name   | OWANAF   | \$  | \$   | Mortgage             |
|           |   |  |   |  | ☐ Car                |
|           | Number Street   | NAME AND ADDRESS OF THE PARTY O |   |  | ☐ Credit card        |
|           |   |  |   |  | Loan repayment       |
|           |   | WARRANTA MARINA MARINA   |   |  | Suppliers or vendors |
|           | City State ZIP Co   | de   |   |  | Other                |
|           |   |  | e e e company de la company | A CONTRACTOR OF THE SECOND CONTRACTOR OF THE S |                      |
|           |   | <u></u>  | \$  | \$   | ☐ Mortgage           |
|           | Creditor's Name   |  |   |  | ☐ Car                |
|           | Number Street   |  |   |  | Credit card          |
|           | Hamber Gacet  |  |   |  | Loan repayment       |
|           |   |  |   |  | Suppliers or vendors |
|           | City State ZIP Co   | da   |   |  | Other                |
|           | ony date za de  |  |   |  |                      |
|           |   |  |   |  |                      |
|           | Creditor's Name   |  | \$  | \$   | ☐ Mortgage           |
|           |   |  |   |  | Car                  |
|           | Number Street   |  |   |  | Credit card          |
|           |   |  |   |  | Loan repayment       |
|           |   |  |   |  | Suppliers or vendors |
|           | City State ZIP Co   | de   |   |  | Other                |
|           | Only State ZIP CO   |  |   |  |                      |

Page 40 of 51 Debtor 1 Case number (if known) 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Mo No Yes. List all payments to an insider. Dates of Total amount Amount you still Reason for this payment payment paid Insider's Name Number Street City ZIP Code Insider's Name Number 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited Inclide payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of **Total amount** Amount you still Reason for this payment payment paid Include creditor's name Insider's Name Number Street City State ZIP Code Insider's Name Number Street

Filed 11/17/16

Entered 11/17/16 16:08:57

Desc Main

Case 16-36699

Case 16-36699 Doc 1 Filed 11/17/16 Entered 11/17/16 16:08:57 Desc Main Document Page 41 of 51

Debtor 1

ALBERT ANTHONY GRIFFITH Case number (#known)\_\_\_\_\_

| J  |  | rces, collection suits, paternity actions, suppor                     | 1. 0. Gustouy mountai     |
|--|--|---|---------------------------|
| No   |  |   |                           |
| Yes. Fill in the details.  |  | niigu. Aan ka hori aga labah inga akan mayyon atayan ayan ga ara sara |                           |
|  | Nature of the case   | Court or agency   | Status of the case        |
| 0  |  |   | — Pending                 |
| Case title   | WHAT .   | Court Name  | On appeal                 |
|  | -  | Number Street   | Concluded                 |
| Case number  |  |   |                           |
|  | MATERIAL STATES  | City State ZIP Code   |                           |
|  | 7  |   |                           |
| Case title   | _  | Court Name  | — Pending                 |
| Not of Administrative and the sound of the s | -  |   | On appeal                 |
|  |  | Number Street   | Concluded                 |
| Case number  | <u>!</u><br>   | City State ZIP Code   | <del></del>               |
|  | Describe the property  | Date  | Value of the property     |
|  |  |   | Value of the property     |
| Creditor's Name  |  |   |                           |
| Creditor's Name  Number Street   |  | Date  | Value of the property     |
|  | Describe the property  | Date  | Value of the property     |
|  | Explain what happened  Property was repo Property was fored  | Date  Dissessed, closed.  | Value of the property     |
| Number Street  | Explain what happened  Property was repo Property was foree Property was garn  | Date  Dissessed.  closed. nished.                                     | Value of the property     |
| Number Street  | Explain what happened  Property was repo Property was fored Property was garm Property was attact                            | ossessed. closed. nished. ched, seized, or levied.                    | \$                        |
| Number Street  | Explain what happened  Property was repo Property was foree Property was garn  | Date  Dissessed.  closed. nished.                                     | \$                        |
| Number Street  | Explain what happened  Property was repo Property was fored Property was garm Property was attact                            | ossessed. closed. nished. ched, seized, or levied.                    | Value of the property  \$ |
| Number Street  | Explain what happened  Property was repo Property was fored Property was garm Property was attact                            | ossessed. closed. nished. ched, seized, or levied.                    | Value of the property  \$ |
| Number Street  City State ZIP  | Explain what happened  Property was repo Property was fored Property was garm Property was attact                            | Date  Dissessed.  closed.  nished.  ched, seized, or levied.  Date    | \$                        |
| Number Street  City State ZIP  | Explain what happened  Property was repo Property was garn Property was attact Describe the property                         | Date  Dissessed.  closed.  nished.  ched, seized, or levied.  Date    | Value of the property     |
| Number Street  City State ZIP  | Explain what happened  Property was repo Property was garn Property was attact  Describe the property  Explain what happened | Date  Dissessed, closed, nished, ched, seized, or levied.  Date       | \$                        |

Case 16-36699 Doc 1 Filed 11/17/16 Entered 11/17/16 16:08:57 Desc Main Page 42 of 51

Debtor 1

Document

Case number (if known)

| ounts or refuse to make a payment be<br>No  |  |  |
|---|--|--|
| Yes. Fill in the details.   |  |  |
|   | Describe the action the creditor took  | Date action Amount   |
| Creditor's Name   |  | was taken  |
| Gredadi & Hame  |  | ***************************************  |
| Number Street   |  | <u> </u>   |
|   | !<br>1   | To the second se |
| City State ZIP Code   | Last 4 digits of account number: XXXX  | :  |
| J.,   | Last 4 digits of account flumber. NOW.   |  |
| oin 1 year hefore you filed for bankrun   | tcy, was any of your property in the possession of ar  | a assignee for the benefit of  |
| ditors, a court-appointed receiver, a cu  |  | assignee for the belieft of  |
| No  |  |  |
| Yes   |  |  |
|   |  |  |
| List Certain Gifts and Contribu   | utions   |  |
|   |  |  |
| in 2 years before you filed for bankrup   | ntcv. did vou give any gifts with a total value of more  | than \$600 per person?   |
|   | oto,, and you give any give man a total tales of moto  | than 4000 per person.  |
|   | in the second se | man your person.   |
| No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600   | Describe the gifts   | Dates you gave Value   |
| Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person   | and the many of the many of the state of the | na varan araba   |
| Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person   | and the many of the many of the state of the | Dates you gave Value   |
| Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift   | and the many of the many of the state of the | Dates you gave Value   |
| Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift   | and the many of the many of the state of the | Dates you gave Value   |
| Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  | and the many of the many of the state of the | Dates you gave Value   |
| Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code   | and the many of the many of the state of the | Dates you gave Value   |
| Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you   | Describe the gifts   | Dates you gave the gifts  \$\$   |
| Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600  | and the many of the many of the state of the | Dates you gave Value   |
| Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person                                   | Describe the gifts  Describe the gifts   | Dates you gave the gifts  \$\$  Dates you gave Value   |
| Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600  | Describe the gifts  Describe the gifts   | Dates you gave the gifts  \$\$ \$  Dates you gave Value  |
| Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person                                   | Describe the gifts  Describe the gifts   | Dates you gave the gifts  \$\$ \$  Dates you gave Value  |
| Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person                                   | Describe the gifts  Describe the gifts   | Dates you gave the gifts  \$\$ \$  Dates you gave Value  |
| Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift | Describe the gifts  Describe the gifts   | Dates you gave the gifts  \$\$ \$  Dates you gave Value  |
| Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift | Describe the gifts  Describe the gifts   | Dates you gave the gifts  \$\$  Dates you gave Value   |
| Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift | Describe the gifts  Describe the gifts   | Dates you gave the gifts  \$\$ \$  Dates you gave Value  |

Case 16-36699 Doc 1 Filed 11/17/16 Entered 11/17/16 16:08:57 Page 43 of 51 Desc Main

| n.  | h4a  | 4 |
|-----|------|---|
| 1)0 | btor | 1 |

| Case number (if known) |
|------------------------|
|------------------------|

| No  |  |  |
|---|--|--|
| Yes. Fill in the details for each gift or con   | ntribution.  |  |
| Gifts or contributions to charities that total more than \$600  | Describe what you contributed  | Date you Value contributed                                     |
| Charity's Name  |  | \$<br>\$   |
| Number Street   |  |  |
| City State ZIP Code   |  |  |
| : List Certain Losses   |  |  |
| sin 1 year hefore you filed for hankrur   | otcy or since you filed for bankruptcy, did you lose anything I  | parausa of thatt fire other                                    |
| ister, or gambling?   | ncy of since you med for builting toy, and you lose unjuring t   | because of their, inc, other                                   |
| · •   |  |  |
| No  |  |  |
| Yes. Fill in the details.   |  |  |
| Describe the property you lost and how the loss occurred  | Describe any insurance coverage for the loss  Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.                | Date of your Value of property loss lost                       |
|   |  |  |
|   |  | \$   |
|   |  |  |
|   |  |  |
| <u></u>   |  | · · · · · · · · · · · · · · · · · · ·                          |
| List Certain Payments or Tra  | nsfers   |  |
| -   |  |  |
| nin 1 year before you filed for bankrup   | otcy, did you or anyone else acting on your behalf pay or tran   | sfer any property to anyone                                    |
| nin 1 year before you filed for bankrup<br>consulted about seeking bankruptcy   | otcy, did you or anyone else acting on your behalf pay or tran<br>or preparing a bankruptcy petition?  |  |
| nin 1 year before you filed for bankrup<br>consulted about seeking bankruptcy<br>de any attorneys, bankruptcy petition p  | otcy, did you or anyone else acting on your behalf pay or tran   |  |
| nin 1 year before you filed for bankrup<br>consulted about seeking bankruptcy<br>de any attorneys, bankruptcy petition provided.  | otcy, did you or anyone else acting on your behalf pay or tran<br>or preparing a bankruptcy petition?  |  |
| nin 1 year before you filed for bankrup<br>consulted about seeking bankruptcy<br>de any attorneys, bankruptcy petition provided.  | otcy, did you or anyone else acting on your behalf pay or tran<br>or preparing a bankruptcy petition?<br>reparers, or credit counseling agencies for services required in yo | ur bankruptcy.   |
| nin 1 year before you filed for bankrup<br>consulted about seeking bankruptcy<br>de any attorneys, bankruptcy petition provided.  | otcy, did you or anyone else acting on your behalf pay or tran<br>or preparing a bankruptcy petition?  | ur bankruptcy.  Date payment or Amount of payment              |
| nin 1 year before you filed for bankrup<br>consulted about seeking bankruptcy<br>de any attorneys, bankruptcy petition po<br>No<br>Yes. Fill in the details.  | otcy, did you or anyone else acting on your behalf pay or tran<br>or preparing a bankruptcy petition?<br>reparers, or credit counseling agencies for services required in yo | our bankruptcy.  |
| nin 1 year before you filed for bankrup<br>consulted about seeking bankruptcy<br>de any attorneys, bankruptcy petition provided.  | otcy, did you or anyone else acting on your behalf pay or tran<br>or preparing a bankruptcy petition?<br>reparers, or credit counseling agencies for services required in yo | ur bankruptcy.  Date payment or Amount of payment transfer was |
| nin 1 year before you filed for bankrup consulted about seeking bankruptcy de any attorneys, bankruptcy petition properties. Fill in the details.  Person Who Was Paid  | otcy, did you or anyone else acting on your behalf pay or tran<br>or preparing a bankruptcy petition?<br>reparers, or credit counseling agencies for services required in yo | Date payment or Amount of payment transfer was made            |
| nin 1 year before you filed for bankrup<br>consulted about seeking bankruptcy<br>de any attorneys, bankruptcy petition po<br>No<br>Yes. Fill in the details.  | otcy, did you or anyone else acting on your behalf pay or tran<br>or preparing a bankruptcy petition?<br>reparers, or credit counseling agencies for services required in yo | ur bankruptcy.  Date payment or Amount of payment transfer was |
| nin 1 year before you filed for bankrup consulted about seeking bankruptcy de any attorneys, bankruptcy petition properties. Fill in the details.  Person Who Was Paid  | otcy, did you or anyone else acting on your behalf pay or tran<br>or preparing a bankruptcy petition?<br>reparers, or credit counseling agencies for services required in yo | Date payment or Amount of payment transfer was made            |
| nin 1 year before you filed for bankrup consulted about seeking bankruptcy de any attorneys, bankruptcy petition provides. Fill in the details.  Person Who Was Paid  | otcy, did you or anyone else acting on your behalf pay or tran<br>or preparing a bankruptcy petition?<br>reparers, or credit counseling agencies for services required in yo | Date payment or Amount of payment transfer was made            |
| nin 1 year before you filed for bankrup consulted about seeking bankruptcy de any attorneys, bankruptcy petition properties. Fill in the details.  Person Who Was Paid  | otcy, did you or anyone else acting on your behalf pay or tran<br>or preparing a bankruptcy petition?<br>reparers, or credit counseling agencies for services required in yo | Date payment or Amount of payment transfer was made            |
| nin 1 year before you filed for bankrup consulted about seeking bankruptcy de any attorneys, bankruptcy petition properties.  No Yes. Fill in the details.  Person Who Was Paid  Number Street                      | otcy, did you or anyone else acting on your behalf pay or tran<br>or preparing a bankruptcy petition?<br>reparers, or credit counseling agencies for services required in yo | Date payment or Amount of payment transfer was made            |
| nin 1 year before you filed for bankrup consulted about seeking bankruptcy de any attorneys, bankruptcy petition properties.  No Yes. Fill in the details.  Person Who Was Paid  Number Street  City State ZIP Code | otcy, did you or anyone else acting on your behalf pay or tran<br>or preparing a bankruptcy petition?<br>reparers, or credit counseling agencies for services required in yo | Date payment or Amount of paymen transfer was made             |

Page 44 of 51 Debtor 1 Case number (if known) Description and value of any property transferred Date payment or Amount of transfer was made payment Person Who Was Paid Number Street City State ZIP Code Email or website address Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was made Person Who Was Paid Number Street City ZIP Code State 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do/not include gifts and transfers that you have already listed on this statement. M No Yes. Fill in the details. Description and value of property Describe any property or payments received Date transfer transferred or debts paid in exchange was made Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you

Filed 11/17/16

Entered 11/17/16 16:08:57

Entered 11/17/16 16:08:57 Filed 11/17/16 Page 45 of 51 Debtor 1 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) ☑ No Yes. Fill in the details. Description and value of the property transferred Date transfer was made Name of trust 🛂 🔀 List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. M No Yes. Fill in the details. Last 4 digits of account number Type of account or Date account was Last balance before closed, sold, moved, instrument closing or transfer or transferred Name of Financial Institution Checking XXXX-☐ Savings Number Street Money market ☐ Brokerage City ZIP Code Other Checking XXXX-Name of Financial Institution ☐ Savings Money market Number Street ☐ Brokerage Other\_ State ZIP Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for segurities, cash, or other valuables? ☑ No Yes. Fill in the details. Who else had access to it? Do you still have it? ☐ No ☐ Yes Name of Financial Institution Name Number Street Number Street City State 71P Code

City

State

ZIP Code

Case 16-36699 Doc 1 Filed 11/17/16 Entered 11/17/16 16:08:57 Desc Main

Case number (if known)

Document Page 46 of 51

Lest Name

Entered 11/17

Page 46 of 51 Debtor 1

| u      | Yes. Fill in the details.   |  |  |  |
|--------|---|--|--|--|
|        |   | Who else has or had access to it?  | Describe the contents  | Do you stil<br>have it?                |
|        | Name of Storage Facility  | Name   | 1  | □ No<br>□ Yes                          |
|        | ,   |  |  | Tes                                    |
|        | Number Street   | Number Street  |  |  |
|        |   | City State ZIP Code  |  |  |
|        | City State ZIP Code   |  |  | ·                                      |
| art e  | Identify Property You Hold  | or Control for Someone Else  |  |  |
| or)    | you hold or control any property that sold in trust for someone.                      | someone else owns? Include any property yo   | ou borrowed from, are storing for,   |  |
| _      | No<br>Yes. Fill in the details.   |  |  |  |
| _      | res. rui iii tile details.  | Where is the property?   | Describe the property Va   | lue NA                                 |
|        | Owner's Name  |  | \$   |  |
|        | N   | Number Street  | · · · · · · · · · · · · · · · · · · ·  |  |
|        | Number Street   |  |  |  |
|        |   | City State ZIP Code  |  |  |
|        | City State ZIP Code   | ony one an oout  | And on the second secon |  |
| art i  | 10: Give Details About Environ  | mental Information   |  |  |
| or the | e purpose of Part 10, the following def   | initions apply:  |  |  |
| haz    | ardous or toxic substances, wastes, c   | ite, or local statute or regulation concerning<br>or material into the air, land, soil, surface wat<br>ing the cleanup of these substances, wastes | er, groundwater, or other medium,  |  |
|        | e means any location, facility, or prope<br>ize it or used to own, operate, or utiliz | rty as defined under any environmental law, e it, including disposal sites.  | whether you now own, operate, or   |  |
|        | zardous material means anything an el<br>ostance, hazardous material, pollutant       | nvironmental law defines as a hazardous was<br>contaminant, or similar term.   | ste, hazardous substance, toxic  |  |
|        |   | s that you know about, regardless of when th   | ney occurred.  |  |
| Has    | any governmental unit notified you th   | at you may be liable or potentially liable und   | er or in violation of an environmental law?  | •                                      |
| M      | No  | ,,,  |  |  |
|        | Yes. Fill in the details.   |  | Anne de la companya  |  |
|        |   | Governmental unit  | nental law, if you know it Date  | of notice                              |
|        |   |  | manual distribution of the state of the stat | ************************************** |
|        | Name of site  | Governmental unit  |  |  |
|        |   |  |  |  |
|        | Name of site  Number Street   | Number Street  |  |  |

Case 16-36699 Doc 1 Filed 11/17/16 Entered 11/17/16 16:08:57 Document

Page 47 of 51

Desc Main

Debtor 1

Case number (if known)

| No Yes. Fill in the details.   |   |   |                                  |
|--|---|---|----------------------------------|
| Tes. Fill til tile details.  | Governmental unit   | Environmental law, if you know it   | Date of notice                   |
| Name of site   | Governmental unit   |   | ļ                                |
| Number Street  | Number Street   |   | \$                               |
|  | City State ZIP Code   |   |                                  |
| City State ZIP Code  |   |   |                                  |
| /<br>ve you been a party in any judicial or a  | administrative proceeding under any   | environmental law? Include settlements  | and orders.                      |
| No   |   |   |                                  |
| Yes. Fill in the details.  |   | nia byanianianianianianiania  | Status of the                    |
|  | Court or agency   | Nature of the case  | case                             |
| Case title   | Court Name  | <u> </u>  | Pending                          |
|  | ······································  | ;   | On appea                         |
|  | Number Street   |   | Conclude                         |
|  |   |   |                                  |
| thin 4 years before you filed for bankr  |   | Business ve any of the following connections to a   | ny business?                     |
| Give Details About Your Betthin 4 years before you filed for bankro  A sole proprietor or self-employed  A member of a limited liability cor   | usiness or Connections to Any uptcy, did you own a business or ha d in a trade, profession, or other act  | Business ve any of the following connections to are ivity, either full-time or part-time  | ny business?                     |
| Give Details About Your Bettin 4 years before you filed for bankr  | usiness or Connections to Any<br>uptcy, did you own a business or ha<br>d in a trade, profession, or other act<br>mpany (LLC) or limited liability partn  | Business ve any of the following connections to are ivity, either full-time or part-time  | ny business?                     |
| thin 4 years before you filed for bankru  A sole proprietor or self-employed  A member of a limited liability cor  A partner in a partnership  | usiness or Connections to Any uptcy, did you own a business or ha d in a trade, profession, or other act mpany (LLC) or limited liability partn executive of a corporation  | Business ve any of the following connections to an invity, either full-time or part-time ership (LLP)   | ny business?                     |
| thin 4 years before you filed for bankri A sole proprietor or self-employed A member of a limited liability cor A partner in a partnership An officer, director, or managing   | usiness or Connections to Any uptcy, did you own a business or ha d in a trade, profession, or other act mpany (LLC) or limited liability partn executive of a corporation ting or equity securities of a corpora   | Business ve any of the following connections to an invity, either full-time or part-time ership (LLP)   | ny business?                     |
| thin 4 years before you filed for bankri  A sole proprietor or self-employee  A member of a limited liability cor  A partner in a partnership  An officer, director, or managing  An owner of at least 5% of the vot   | usiness or Connections to Any uptcy, did you own a business or ha d in a trade, profession, or other act mpany (LLC) or limited liability partn executive of a corporation ting or equity securities of a corporation Part 12.  | Business  ve any of the following connections to an ivity, either full-time or part-time ership (LLP)  tion  ness.  Employer Identification reserved.   | umber                            |
| thin 4 years before you filed for bankri  A sole proprietor or self-employed  A member of a limited liability cor  A partner in a partnership  An officer, director, or managing  An owner of at least 5% of the voi   | usiness or Connections to Any uptcy, did you own a business or ha d in a trade, profession, or other act mpany (LLC) or limited liability partn executive of a corporation ting or equity securities of a corpora Part 12. iill in the details below for each busi  | Pusiness  ve any of the following connections to an ivity, either full-time or part-time ership (LLP)  tion  ness.  Employer Identification in Do not include Social Se   | number<br>curity number or ITIN. |
| Give Details About Your Betthin 4 years before you filed for bankru A sole proprietor or self-employed A member of a limited liability com A partner in a partnership An officer, director, or managing An owner of at least 5% of the vol No. None of the above applies. Go to Yes. Check all that apply above and for the second self-employed than the second self-employed | usiness or Connections to Any uptcy, did you own a business or ha d in a trade, profession, or other act mpany (LLC) or limited liability partn executive of a corporation ting or equity securities of a corpora Part 12. iill in the details below for each busi  | ve any of the following connections to an ivity, either full-time or part-time ership (LLP)  tion  mess.  Employer Identification or Do not include Social Se   | number<br>curity number or ITIN. |
| 11: Give Details About Your Bethin 4 years before you filed for bankrum A sole proprietor or self-employed A member of a limited liability coron A partner in a partnership An officer, director, or managing An owner of at least 5% of the volume. No. None of the above applies. Go to Yes. Check all that apply above and for Business Name  | usiness or Connections to Any uptcy, did you own a business or ha d in a trade, profession, or other act mpany (LLC) or limited liability partn executive of a corporation ting or equity securities of a corpora Part 12. iill in the details below for each busi  | ve any of the following connections to an ivity, either full-time or part-time ership (LLP)  tion  mess.  Employer Identification in Do not include Social Se   | number<br>curity number or ITIN. |
| Give Details About Your Betthin 4 years before you filed for bankrum A sole proprietor or self-employed A member of a limited liability corm A partner in a partnership An officer, director, or managing An owner of at least 5% of the volume. No. None of the above applies. Go to Yes. Check all that apply above and for Business Name  | usiness or Connections to Any uptcy, did you own a business or ha d in a trade, profession, or other act mpany (LLC) or limited liability partn executive of a corporation ting or equity securities of a corpora Part 12. ill in the details below for each business   | ve any of the following connections to an ivity, either full-time or part-time ership (LLP)  tion  mess.  Employer Identification or Do not include Social Se   | number<br>curity number or ITIN. |
| 11: Give Details About Your Bethin 4 years before you filed for bankrum A sole proprietor or self-employed A member of a limited liability coron A partner in a partnership An officer, director, or managing An owner of at least 5% of the volume. No. None of the above applies. Go to Yes. Check all that apply above and for Business Name  | usiness or Connections to Any uptcy, did you own a business or ha d in a trade, profession, or other act mpany (LLC) or limited liability partn executive of a corporation ting or equity securities of a corpora Part 12. ill in the details below for each business Describe the nature of the business  Name of accountant or bookkeeper | ve any of the following connections to an ivity, either full-time or part-time ership (LLP)  tion  Employer Identification in Do not include Social Se  EIN:  Dates business existed  From To _  Employer Identification in                                     | number<br>curity number or ITIN. |
| Give Details About Your Betthin 4 years before you filed for bankrum A sole proprietor or self-employed A member of a limited liability corm A partner in a partnership An officer, director, or managing An owner of at least 5% of the volume. No. None of the above applies. Go to Yes. Check all that apply above and for Business Name  | usiness or Connections to Any uptcy, did you own a business or ha d in a trade, profession, or other act mpany (LLC) or limited liability partn executive of a corporation ting or equity securities of a corpora Part 12. ill in the details below for each business Describe the nature of the business  Name of accountant or bookkeeper | ve any of the following connections to an ivity, either full-time or part-time ership (LLP)  tion  mess.  Employer Identification in Do not include Social Se  EIN:  Dates business existed  From To  Employer Identification in Do not include Social Se       | number curity number or ITIN.    |
| Give Details About Your Beathin 4 years before you filed for banking A sole proprietor or self-employed A member of a limited liability con A partner in a partnership An officer, director, or managing An owner of at least 5% of the vol. No. None of the above applies. Go to Yes. Check all that apply above and for Business Name  Number Street   | usiness or Connections to Any uptcy, did you own a business or ha d in a trade, profession, or other act mpany (LLC) or limited liability partn executive of a corporation ting or equity securities of a corpora Part 12. ill in the details below for each business Describe the nature of the business  Name of accountant or bookkeeper | ve any of the following connections to an ivity, either full-time or part-time ership (LLP)  tion  mess.  Employer Identification in Do not include Social Se  EIN:  Dates business existed  From To  Employer Identification in Do not include Social Se  EIN: | number curity number or ITIN.    |

Case 16-36699 Doc 1 Filed 11/17/16 Entered 11/17/16 16:08:57 Desc Main

Page 48 of 51

Debtor 1

Document //

Case number (if known)

|  | Describe the nature of the business  | Employer Identification number  Do not include Social Security number or ITIN.   |
|--|--|--|
| Business Name  | :  | EIN:   |
| Number Street  | Name of accountant or bookkeeper   | Dates business existed   |
| City State ZIP Code  |  | From To  |
| 28. Within 2 years before you filed for bankrup institutions, creditors, or other parties. | tcy, did you give a financial statement to anyone a  | bout your business? Include all financial  |
| □ No   |  |  |
| Yes. Fill in the details below.  | Date issued  |  |
| Name   | MM / DD / YYYY   |  |
| Number Street  |  |  |
| City State ZIP Code  Part 12: Sign Below   |  | And produce and analysis of the second secon |
| answers are true and correct. I understand   | t of Financial Affairs and any attachments, and I de d that making a false statement, concealing proper result in fines up to \$250,000, or imprisonment for | rty, or obtaining money or property by fraud   |
| Signature of Debtor 1  | Signature of Debtor 2  | manuscus and construction of the construction  |
| Date 11/17 /3010   | Date   | for Pankrupter (Official Form 407)?  |
| No Yes   | tatement of Financial Affairs for Individuals Filing   | ior Bankruptcy (Official Form 107)?  |
| Did you pay or agree to pay someone who  | o is not an attorney to help you fill out bankruptcy   | forms?   |
|  | Atta<br>Dec  | ch the Bankruptcy Petition Preparer's Notice, claration, and Signature (Official Form 119).  |
|  |  |  |

Case 16-36699 Doc 1 Filed 11/17/16 Entered 11/17/16 16:08:57 Desc Mai Document Page 49 of 51

| Fill in this in                 | formation to identify    | y your case:                |                        |
|---------------------------------|--------------------------|-----------------------------|------------------------|
| Debtor 1                        | ALBERT<br>First Name     | ANTHONY<br>Middle Name      | GRIFFI Th<br>Last Name |
| Debtor 2<br>(Spouse, if filing) | First Name               | Middle Name                 | Last Name              |
| United States f                 | Bankruptcy Court for the | : Northern District of Illi | nois                   |
| Case number (If known)          |                          |                             |                        |
|                                 |                          |                             |                        |

### Official Form 108

## Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- m creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

|  | 336 | ю |
|--|-----|---|
|  |     |   |

**List Your Creditors Who Have Secured Claims** 



| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt?  | Did you claim the property<br>as exempt on Schedule C |
|---|--|---|
| Creditor's  | ☐ Surrender the property.  | ☐ No  |
| name:   | Retain the property and redeem it.                               | Yes   |
| Description of property securing debt:                    | Retain the property and enter into a<br>Reaffirmation Agreement. |   |
| accounty dobt.  | ☐ Retain the property and [explain]:                             |   |
|   | ☐ Surrender the property.  |   |
| name:   |  | Yes   |
| Description of<br>property<br>securing debt:              | Retain the property and enter into a Reaffirmation Agreement.    |   |
| securing debt.  | Retain the property and [explain]:                               |   |
| Creditor's  | ☐ Surrender the property.  |   |
| name:   | Retain the property and redeem it.                               | Yes   |
| Description of property securing debt:                    | Retain the property and enter into a<br>Reaffirmation Agreement. |   |
| socialing dobt.   | ☐ Retain the property and [explain]:                             |   |
| Creditor's  | ☐ Surrender the property.  | ☐ No  |
| name:   | Retain the property and redeem it.                               | ☐ Yes   |
| Description of property securing debt:                    | Retain the property and enter into a<br>Reaffirmation Agreement. |   |
|   | Retain the property and [explain]:                               |   |

Debtor 1

Case 16-36699 Doc 1 Filed 11/17/16

Entered 11/17/16 16:08:57 Desc Main Page 50 of 51

Case number (# known)

Part 2:

**List Your Unexpired Personal Property Leases** 

NONE

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

| _essor's name:   | ☐ No  |                              |
|--|---|------------------------------|
| Description of leased property:  | ☐ Yes   |                              |
| .essor's name:   | □No   |                              |
| Description of leased property:  | ☐ Yes   |                              |
| .essor's name:   | □ No  |                              |
| Description of leased roperty:   | ☐ Yes   |                              |
| essor's name:  | No  | n in a market and the second |
| Description of leased property:  | Yes   |                              |
| .essor's name:   |   |                              |
| Description of leased property:  | ☐ Yes   |                              |
| .essor's name:   |   |                              |
| Description of leased property:  | ☐ Yes   |                              |
| .essor's name:   | □ No  |                              |
| Description of leased property:  | ☐ Yes   |                              |
|  |   | - 1.00. 200.000              |
| Sign Below   |   |                              |
| nder penalty of perjury, I declare that I have<br>ersonal property that is subject to an unexp | ndicated my intention about any property of my estate that secures a debt and any ed lease. |                              |
| Albert Anthony Guffet  | -> <b>x</b>   |                              |
| Signature of Debtor 1  | Signature of Debtor 2   |                              |
| . 41171717111111111111111111111111111111   | Date  |                              |

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

| In Re:                             | ) |                     |
|------------------------------------|---|---------------------|
| ALBERT ANTHONY GRIFFITH Debtor (s) | ) | Case No.<br>Chapter |

## List of Creditors

| Ameri Cash       | U.S. Cellular            |
|------------------|--------------------------|
| Bose Corporation | VERIZON WIRELESS         |
| GENESIS CREDIT   | INTERNAL REVENUE SERVICE |
| SPRINT           |                          |
| T-MOBILE         |                          |